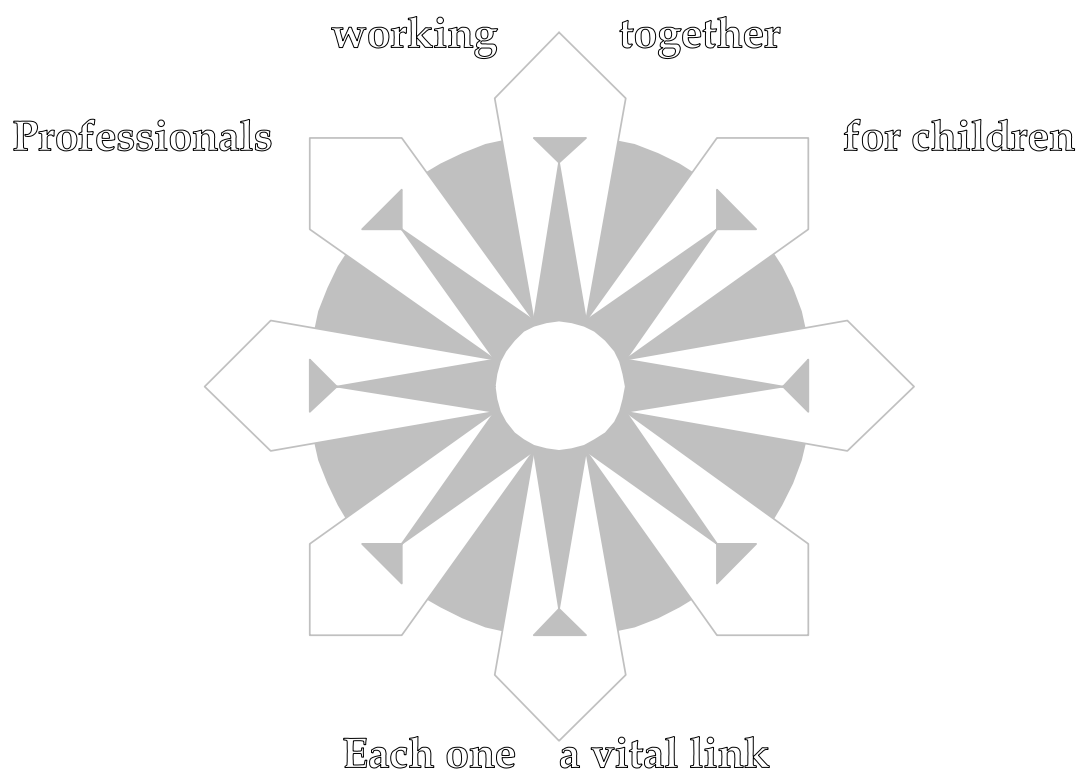


Special Education Paraprofessionals in Montana Schools

A Resource Guide For Administrators, Educators, and Paraprofessionals



Office of Public Instruction
October 2002

ACKNOWLEDGMENTS

This resource guide for school administrators, educators, and paraprofessionals was developed pursuant to school districts' expressed need for direction to appropriately utilize the state's valuable and burgeoning workforce titled "Paraprofessionals."

The development of this resource guide was supported by Mountain Plains Regional Resource Center in cooperation with the Montana Office of Public Instruction and a State Paraprofessional Task Force consisting of key personnel throughout the state knowledgeable about the valuable contributions of paraprofessionals in Montana schools.

Special thanks to these members of Montana's Paraprofessional Task Force for the time and energy they so willingly and unselfishly gave to this project.

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Additionally, the guide is a compilation of current state procedural guides from the states of Kansas, Arkansas, Colorado, Utah, Iowa, Nebraska, North Dakota, and Minnesota that was collected and organized through the efforts of Mountain Plains Regional Resource Center. The section of the resource guide pertaining to the issues of paraprofessional standards and competencies was developed through a review and adoption of many policies advanced by the Council of Exceptional Children, the state of Washington's Education Association, and Washington Office of Public Instruction. The section on Health and Safety was developed thanks to Barbara Stimson and the Para2 Project from the University of Colorado, as well as Cindy Swidler, Cathy Rase, Ron Marks, and Linda Simon of Missoula County Public Schools who provided information related to Montana practices. Finally, thanks to Kathy Kelker for her contributions of definitions of disabilities from the PLUK publication *"Parent's Guide to Special Education."*

The efforts and contributions of individuals responsible for these comprehensive and current guidelines, paraprofessional standards and competencies, and documents are greatly appreciated.

Technical assistance manuals are developed by the Division of Special Education to provide guidance to schools, parents and advocates regarding eligibility for and the implementation of services to students with disabilities under the Individuals with Disabilities Education Act, the Administrative Rules of Montana, and Montana statutes.

This document contains recommended practices and procedures that may enhance the services to children and youth with disabilities. All policy statements regarding the delivery of special education and related services are contained in the current *Montana State Plan Under the Individuals with Disabilities Education Act*.

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I. PREFACE

This resource guide was developed with the assistance of the Paraprofessional Task Force comprised of Montana paraprofessionals, parents, teachers, and administrators in general and special education.

Although the guidelines do not have the force of law or regulation, they are considered best practice procedures. School programs are strongly encouraged to use the information in the document. During the early stages of the Paraprofessional Task Force activities, the group developed Vision and Mission Statements to serve as a guide for the ensuing work to be accomplished. These statements are also representative of the philosophy and beliefs of the Montana Office of Public Instruction. They are as follows:



Mission

"To enable paraprofessionals and personnel with whom they work to perceive their work with students as essential and valuable, reinforce an attitude of paraprofessional belongingness in the school community, and develop a sense of competence in providing the highest quality of service for students they assist."

II. INTRODUCTION

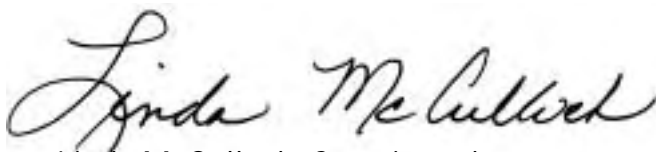
The Office of Public Instruction recognizes the importance of utilizing a wide variety of personnel in Special Education. Burgeoning needs for individualized services for students with disabilities and complex staffing patterns require administrators, teachers and paraprofessionals to work differently and more efficiently. Nationally, within the last decade, the number of paraprofessionals providing services to students with disabilities nearly doubled. Montana mirrors that trend. We know that paraprofessionals are a vital resource for school districts in meeting the program needs for students with disabilities.

This document is primarily intended to help educators and administrators improve the effectiveness of paraprofessionals in the school setting.

It is also designed to communicate to paraprofessionals performance expectations required of them. Further, it presents a rationale for the utilization of paraprofessionals and describes the relationships and roles of school personnel as they work as a team with paraprofessionals, ensuring the most desirable results for students. These definitions, roles and activities are defined in the resource guide to enable a school district to obtain a clear picture of the type of paraprofessional being discussed. Finally, the resource guide provides suggestions for the supervision and evaluation of paraprofessionals, as well as an array of continuous and comprehensive training experiences.

This guide is by no means comprehensive. It represents an excellent current collection of ideas and suggestions from not only the task force, but also a number of states across the country highlighting their best practices for utilizing paraprofessionals most appropriately.

We hope this resource guide is helpful to you as you work with Montana's children.



Linda McCulloch, Superintendent
Montana Office of Public Instruction
Updated October 2002

III. DEFINITIONS

Following are definitions of terms used in this resource guide. They are consistent with the conceptual foundation of the roles and responsibilities for all paraprofessionals as described in Section VII of this document.

“FREE APPROPRIATE PUBLIC EDUCATION”

Means special education and related services that:

- are provided at public expense under public supervision and direction and without charge;
- meet the accreditation standards of the board of public education, the special education requirements of the superintendent of public instruction, and the requirements of the Individuals with Disabilities Education Act;
- include preschool, elementary school, and high school education in Montana; and
- are provided in conformity with an individualized education program that meets the requirements of the Individuals with Disabilities Education Act.

“LEARNING ENVIRONMENT”

Any location in which instruction takes place for the purpose of addressing a student’s educational needs.

“PARAEDUCATORS”

Constitute the largest number of “paraprofessionals.” These persons work alongside of and under the direction of educational professionals and/or related service providers responsible for the conduct and management of the classroom or program, including design, implementation, and evaluation of instructional programs and student progress. Paraeducators fulfill a complementary role in special education, regular education, and in other federal programs.

“PARAPROFESSIONAL”

The more inclusive term “paraprofessional” refers to all of those “paras” working in the school setting, including the related services such as speech, occupational and physical therapy, and school health nurse aides.

*Para means
“alongside of.”*

“PROFESSIONAL” OR “CERTIFIED”

Personnel who hold teacher or administrative certification or professional licensure.

“TRANSDISCIPLINARY TEAM”

A teaching/learning/working relationship among service providers across traditional disciplinary or role boundaries characterized by an exchange of information and skills for the benefit of the students. (Child Study and Individual Educational Programs Teams are considered transdisciplinary teams.)

IV. RATIONALE FOR USING PARAPROFESSIONALS

Guaranteeing a free and appropriate public education for all students, regardless of disability, student background, geographical location, and service availability, presents school districts with enormous challenges to comply with state and federal regulations.

Paraprofessionals, whether they are in special education, Title I, or regular education, have become a vital link to enable school districts to expand their programs and adapt to the special needs of students in the form of smaller and more varied classrooms and instructional settings. Paraprofessionals also play a key role in modifying programs for the broadening spectrum of student abilities that schools must now accommodate. Additionally, paraprofessionals are an essential resource to more completely implement the requirement of the least restrictive education alternative.

Individualized education programs for students with disabilities make it necessary for school districts to offer an array of broader and more varied educational experiences often resulting in small group or one-to-one instruction. Tasks that nondisabled students can approach with little or no difficulty frequently present major problems for students with disabilities requiring intensive and individualized program planning, implementation, and evaluation.

The central concern for school districts should not be to reduce costs, but to ensure the highest quality of educational programs for students. Paraprofessionals increase the amount of quality instructional time enabling individual student needs to be met in a timely and efficient manner. Effectively utilized, paraprofessionals create positive role models that expand student-learning opportunities through individualized attention, instruction, and behavior management. Further, they ensure that students receive more consistent and safer instructional and general school environments.

*Far and away, the best
prize life has to offer is the
chance to work hard at
work worth doing.
—Theodore Roosevelt*

Finally, and perhaps just as important as providing direct instructional services to students, paraprofessionals enable teachers to have time to develop their instructional programs for all students with greater consistency in planning, teaching, and evaluating their special education program.

V. LEGAL AUTHORITY FOR PARAPROFESSIONALS IN MONTANA'S SCHOOLS

MONTANA ADMINISTRATIVE STATUTES AND RULES

Montana Administrative Statutes and Rules (2001) recognizes a school's employment of a teacher and aide or instructional assistants (paraprofessional) in Section 10.55.715. It sets forth the responsibilities of instructional assistants employed in Montana schools. Although instructional assistants need not be certified, the following supervision is required:

- (a) Instructional aides assigned, *due to classroom size or diversity*, must be under direct supervision of a certified teacher. This means that the aide must be responsible to a certified teacher who has the legal authority for instruction and assessment of students. The supervising teacher must be available while the aide is fulfilling his/her responsibilities and must not be simultaneously assigned to another teaching duty or preparation time.
- (b) Instructional aides assigned to assist students with special education needs must be under the supervision of the teacher or other professional designated as primarily responsible for instructional planning for the student. The designated professional has the responsibility to provide regularly scheduled communication and direction to the instructional aide and not to delegate any activity to the instructional aide that requires professional skill, knowledge, and judgment.
- (c) Instructional aides hired to *assist students in gaining specialized knowledge* not generally available from a properly endorsed teacher shall be supervised by a teacher certified at the proper level. This certified teacher is responsible for instruction and assessment of students and must not be simultaneously assigned to another teaching duty or preparation time.

FEDERAL STATUTES AND REGULATIONS OF IDEA '97 RELATED TO PARAPROFESSIONALS AND ASSISTANTS

1. Federal Statutes

Section 20 U.S.C. 1412(a)(15)(iii) allows paraprofessionals and assistants who are appropriately trained and supervised, and in accordance with state law, regulations, or written policy, in meeting the requirements of this part to be used to assist in the provision of special education and related services to children with disabilities under this part.

Section 20 U.S.C. 1453(c)(3)(D) requires all states through their State Improvement Plan and Comprehensive System for Professional Development (CSPD) to indicate how the state will address the identified needs for inservice and preservice preparation to ensure that all personnel who work with children with disabilities (including both professional and paraprofessional personnel who provide special education, general education, related services,

or early intervention services) obtain the skills and knowledge necessary to meet the needs of children with disabilities.

No Child Left Behind Act of 2001: Section 1119 (2)

(c) New Paraprofessionals

(1) In general- Each local educational agency receiving assistance under this part shall ensure that all paraprofessionals hired after the date of enactment of the No Child Left Behind Act of 2001 and working in a program supported with funds under this part shall have-

- a. Completed at least 2 years of study at an institution of higher education;
- b. Obtained an associate's (or higher) degree; **or**
- c. Met a rigorous standard of quality and can demonstrate, through a formal state or local academic assessment,
 - i. Knowledge of, and the ability to assist in instructing, reading, writing and mathematics; **or**
 - ii. Knowledge of, and the ability to assist in instructing, reading readiness, writing readiness, and mathematics readiness, as appropriate.

(2) Clarification—The receipt of a secondary school diploma (or its recognized equivalent) shall be necessary but not sufficient to satisfy the requirements of paragraph (1) (c).

(d) Existing Paraprofessionals—Each local educational agency receiving assistance under this part shall ensure that all paraprofessionals hired before the date of enactment of the No Child Left Behind Act of 2001, and working in a program supported with funds under this part, shall, not later than 4 years after the date of enactment, satisfy the requirements of subsection (C)(1).

(e) Exceptions for Translation and Parental Involvement Activities—Subsections (c) and (d) shall not apply to a paraprofessional-

- (1) Who is proficient in English and a language other than English and who provides services primarily to enhance the participation of children in programs under this part by acting as a translator; or
- (2) Whose duties consist solely of conducting parental involvement activities consistent with Section 1118.

(f) GENERAL REQUIREMENTS FOR ALL PARAPROFESSIONALS- Each local educational agency receiving assistance under this part shall ensure that all paraprofessionals working in a program supported with funds under this part, regardless of the paraprofessionals' hiring dates, have earned a secondary school diploma or its recognized equivalent.

(g) DUTIES OF PARAPROFESSIONALS-

(1) IN GENERAL—Each local educational agency receiving assistance under this part shall ensure that a paraprofessional working in a program supported with funds under this part is not assigned a duty inconsistent with this subsection.

- (2) RESPONSIBILITIES PARAPROFESSIONALS MAY BE ASSIGNED—A paraprofessional described in paragraph (1) may be assigned-
- a. To provide one-on-one tutoring for eligible students, if the tutoring is scheduled at a time when a student would not otherwise receive instruction from a teacher;
 - b. To assist with classroom management, such as organizing instructional or other materials;
 - c. To provide assistance in a computer laboratory;
 - d. To conduct parental involvement activities;
 - e. To provide support in a library or media center;
 - f. To act as a translator; or
 - g. To provide instructional services to students in accordance with paragraph (3).
- (3) ADDITIONAL LIMITATIONS—A paraprofessional described in paragraph (1)-
- a. May not provide any instructional service to a student unless the paraprofessional is working under the direct supervision of a teacher consistent with Section 1119; and
 - b. May assume limited duties that are assigned to similar personnel who are not working in a program supported with funds under this part, including duties beyond classroom instruction that do not benefit participating children, so long as the amount of time spent on such duties is the same proportion of total work time as prevails with respect to similar personnel at the same school.
- (h) USE OF FUNDS—A local educational agency receiving funds under this part may use such funds to support ongoing training and professional development to assist teachers and paraprofessionals in satisfying the requirements of this subsection.

2. Federal Regulations

Section 300.136(4) provides authority for schools and programs to utilize paraprofessionals and assistants as follows:

A state may allow paraprofessionals and assistants who are appropriately trained and supervised, in accordance with state law, regulations, or written policy in meeting the requirements of this part, to be used to assist in the provision of special education and related services under Part B of the Act.

Additionally, Section 300.382(b) addresses personnel preparation in the area of early intervention with the content knowledge and collaborative skills needed to meet the needs of infants and toddlers with disabilities.

VI. SUGGESTED CORE COMPETENCIES AND PROGRAM PRINCIPLES FOR PARAPROFESSIONALS

The following set of core competencies and principles describe the programs that are necessary to support the effective employment of paraprofessionals in public schools. These core competencies can also be used to direct training programs for paraprofessionals. When these principles are met, paraprofessionals will effectively support and extend instruction and services, thereby increasing student learning.

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CORE COMPETENCIES

For paraprofessionals to work in education and related services programs for students, paraprofessionals will demonstrate:

- an understanding of the distinctions between the roles and responsibilities of certified/licensed staff and paraprofessionals;
- an ability to provide positive behavioral support and management;
- an ability to practice ethical and professional standards of conduct, including the requirements of confidentiality;
- a knowledge of (a) patterns of human development and milestones typically achieved at different ages, and (b) risk factors that may prohibit or impede typical development;
- an ability to motivate and assist students to (a) build self-esteems, (b) develop interpersonal skills that will help them avoid isolation in different learning and living environments, and (c) strengthen skills to become more independent by monitoring and controlling their behavior;
- an ability to follow the health, safety, and emergency procedures of the agency where they are employed;
- an ability to use appropriate technology and equipment;
- an ability to provide special care or physical assistance; and
- an ability to utilize appropriate strategies and techniques to provide instructional support in a variety of settings.

PROGRAM PRINCIPLES

PRINCIPLE 1: THE PARAPROFESSIONAL AND THE INSTRUCTIONAL TEAM

Paraprofessionals are respected and supported as team members responsible for assisting in the delivery of instruction and related services.

Possible Examples of Implementation of Principle No.1

- In designing instructional programs, school district personnel have defined the roles of participating certificated staff as the instructional leaders and paraprofessionals as the assistants and support staff in designing instructional programs for students.
- The program provides for systematic communication and regular meetings among team members.
- The school district newsletters, inservice training, conference activities, and other communications include information for and about paraprofessionals. All such district communications are distributed to paraprofessionals.

PRINCIPLE 2: ROLE CLARIFICATION

The entire instructional team participates within clearly defined roles to provide an appropriate educational program for students.

Possible Examples of Implementation of Principle No. 2

- Paraprofessionals are supervised by a designated certified staff member.
- A written and up-to-date job description for each paraprofessional is provided to the paraprofessional and the designated supervisor of the paraprofessionals.
- The role of the supervisor is clearly defined, and guidelines for supervision are established.
- Paraprofessionals are regularly involved in planning, but are not solely responsible for planning the instructional program for students.
- The paraprofessionals will not be required to assume responsibilities assigned to staff, such as development of IEP goals, creating lesson plans, formally evaluating students, and substituting for the teacher.
- Clearly written procedures for routine and emergency tasks exist for paraprofessional and certified staff members.

PRINCIPLE 3: DIFFERENTIATED STAFFING

By recognizing training and skill levels, differentiated staffing of paraprofessionals enhances the continuity and quality of services for students.

Possible Examples of Implementation of Principle No. 3

- A clearly defined continuum of job responsibilities for paraprofessionals is established to ensure instructional quality for students.
- With the use of differentiated staffing, paraprofessionals are placed in positions for which they are qualified.
- Paraprofessionals are provided with opportunities for career development and compensation commensurate with responsibilities, experience, and training.

PRINCIPLE 4: PARAPROFESSIONAL TRAINING

To ensure quality education for students and appropriate safety for students and staff, paraprofessionals are provided with a district orientation and training commensurate with their responsibilities prior to assuming those responsibilities.

Possible Examples of Implementation of Principle No. 4

- Paraprofessionals receive an orientation to their duties and to district policies and procedures.
- Paraprofessionals receive training in the general areas relating to their responsibilities, as well as areas specific to their job assignments. Districts, community colleges, universities, regional CSPD councils, special education cooperatives, and the state education agency may provide this training.
- Paraprofessionals are included in district staff development programs.
- Paraprofessionals are trained with certified staff whenever possible to provide common understanding and effective teamwork.

PRINCIPLE 5: PROFESSIONAL DEVELOPMENT FOR CERTIFIED STAFF IN SUPERVISORY ROLES

Certified staffs are sufficiently trained in supervisory skills to work effectively with para-professionals.

- A. Certified staff members receive training in the supervision of paraprofessionals prior to being designated as supervisors. Suggested training areas:
 - time management
 - goal setting and feedback techniques
 - effective communication and collaboration
 - delegation
 - role clarification
 - professionalism and ethics
 - problem solving
 - knowledge of orientation information given to paraprofessionals
- B. Certified staff should receive the same training as the paraprofessional with whom they work.

PRINCIPLE 6: ADMINISTRATOR SUPPORT

Administrators exercise leadership by recognizing paraprofessionals as career partners.

Possible Examples of Implementation of Principle No. 6

- Administrators understand the roles and responsibilities of paraprofessionals in supporting instruction and improving student outcomes.
- Administrators inform the school board of the changing roles and responsibilities of paraprofessionals.
- Administrators assume an active and substantive role in overseeing the participation of paraprofessionals in effective instructional programs.
- Administrators understand the ethical considerations of assigning paraprofessionals to appropriate and supported positions.
- Administrators assign paraprofessionals to a program as part of an instructional team rather than to an individual student.
- Administrators create a work schedule that provides time for regular, organized, and systematic communication among the paraprofessionals and other members of the instructional team.
- Administrators at the building level acknowledge paraprofessionals for their expertise and contributions.

VII. ADMINISTRATOR, TEACHER AND PARAPROFESSIONAL ROLES

The primary focus of this resource guide is the effective utilization of paraprofessionals assigned to special education. However, these guidelines should have general applicability to paraprofessionals in other school settings. Differentiated staffing patterns allow for the use of paraprofessionals to assist in the delivery of instructional services to students with disabilities. It should be observed that the special education paraprofessional's role is significantly different from that of the traditional regular classroom clerical or classroom assistant.

School districts who employ paraprofessionals in special education should plan and administer paraprofessional programs in a way that maximizes the potential of paraprofessionals and ensures that student needs are adequately met and their rights protected. In utilizing paraprofessionals, school districts and teachers should keep in mind the following principles:

- Paraprofessional programs are centered at the local educational level. Individual schools should develop specific policies regarding their programs. School administrators are ultimately responsible for the appropriate utilization of paraprofessionals.
- District paraprofessional training should focus on collaborative partnerships essential for effective teaching.
- Teachers serve as instructional managers in the schools. The instructional outcomes in the classroom are the responsibility of the teacher, not the paraprofessional. Paraprofessional programs must be organized to allow for regular and systematic evaluation, communication, and supervision.
- Teachers, as well as paraprofessionals, require both preservice and inservice training to utilize their paraprofessionals effectively. Training should focus on the roles of decision makers and managers of the educational environment.

Paraprofessionals offer a viable means of delivering services to students if they are trained for these duties and supervised. Administrators and teachers who work with paraprofessionals should not assume they know how to get things done through other persons. Appropriate management of paraprofessionals is a skill that needs to be developed. Teaching staff needs to be prepared for this management role so that the best interests of the students are met.

An important element of a successful special education program is the clear delineation of the different roles of the special education professional and the paraprofessionals. It might appear that a paraprofessional

An important element of a successful special education program is the clear delineation of the different roles of the special education professional and the paraprofessionals.

and a professional working side by side in serving special education students are performing identical tasks; however, their roles and responsibilities differ.

Certain job responsibilities can only be performed by certified persons, such as administrators or teachers, and cannot be delegated to a paraprofessional. The following general guidelines outline major roles and responsibilities:

A. SCHOOL BUILDING ADMINISTRATOR OR SUPERVISOR

Role: The school administrator should be a member of every educational team. The school administrator makes administrative decisions regarding personnel responsibilities, allocating resources, and the applicability of laws, regulations, and policies to the school building's educational programs.

SPECIFIC RESPONSIBILITIES OF THE SCHOOL BUILDING ADMINISTRATOR OR SUPERVISOR SHOULD INCLUDE:

- assist with students' schedules.
- develop district or building policies regarding the utilization of paraprofessionals.
- ensure safety and well-being of all students and staff.
- participate on school-based support teams.
- consult and collaborate with appropriate district and building personnel.
- assure school program accessibility for all students.
- encourage all team members to be a part of the IEP process.
- develop student educational programs to comply with federal, state, district, and building rules, regulations, and policies.
- plan for appropriate continuous training for all school building personnel, including substitute teachers and substitute paraprofessionals.
- include paraprofessionals in school/districtwide vision/mission statements.

B. SPECIAL EDUCATION/TITLE I PROFESSIONAL (SUPERVISOR OR CERTIFIED TEACHER)

Role: In relationship to paraprofessionals, the Special Education/ Title I professional must function both in a leadership and supervisory role. It is the certified person's responsibility to assure that students are moving toward the achievement of individualized goals and objectives. Paraprofessionals serve under the direction and supervision of a certified person; therefore enabling the certified person to carry out students' individualized education programs.

SPECIFIC RESPONSIBILITIES OF THE SPECIAL EDUCATION/ TITLE I PROFESSIONAL SHOULD INCLUDE:

- participate regularly on school-based support teams assisting in collecting, coordinating, and interpreting information about the students, plan and/or prescribe the learning environment for eligible students.
- plan and implement instructional objectives based on the individualized program for students.
- coordinate, consult, and/or collaborate with appropriate building and district personnel.
- prepare and collaborate with the paraprofessional as to the specifics of the instruction.
- monitor, supervise, and evaluate the paraprofessionals assigned to students.
- involve parents in all aspects of the student's education.
- in the case of special education professionals, act as a case manager in directing and participating in the staffing team process that includes assuring the assessment of the student's current level of function, identification of student needs, determination of disabling conditions, and clustering and prioritizing of annual measurable goals and characteristics of service.

C. GENERAL EDUCATOR

Role: The general educator plays a collaborative role in meeting the needs of all students in the educational process.

SPECIFIC RESPONSIBILITIES OF THE GENERAL EDUCATOR RELATING TO SPECIAL EDUCATION SHOULD INCLUDE:

- collaborate with special education teachers, related service providers, and paraprofessionals.
- provide direct instruction to eligible students.

- provide an environment that recognizes and adapts to individual differences of students.
- implement effective discipline strategies as directed.
- participate as a team member in developing problem-solving strategies for individual students.

D. PARAPROFESSIONAL

Role: Paraprofessionals assist in the provision of services related to instruction and supervision of students. Delivery of instruction to the student may be carried out by the paraprofessional under the supervision of the certified person. Individual special education certified staff might choose to vary the responsibilities of the paraprofessional depending upon the individual skills and interests of the paraprofessional and the needs of the students. The following list illustrates responsibilities that could be assigned to the paraprofessional.

SPECIFIC RESPONSIBILITIES FOR THE PARAPROFESSIONAL WORKING WITH STUDENTS WITH SPECIAL NEEDS SHOULD INCLUDE:

- carry out instructional programs and lessons in various learning environments as designated in the instructional plan based on the IEP.
- assist individual students in performing activities initiated by the professional.
- reinforce learning with individuals or in small groups.
- assist the professional in observing, recording, and charting behavior.
- assist the professional with crisis problems and ongoing approaches to behavior management.
- participate in building-level duties as assigned by building administrator or designee.
- score tests and papers and assist in data collection procedures.
- perform clerical tasks, i.e., typing, filing, and duplicating.
- assist in preparation, production, and maintenance of instructional materials.
- maintain and operate instructional and/or adaptive equipment.
- collaborate with the IEP team in an ongoing review of student programs.
- attend IEP or other staff meetings at the request of teacher, administrator, or parent.
- assist students with mobility and self-care needs.

E. SUBSTITUTE

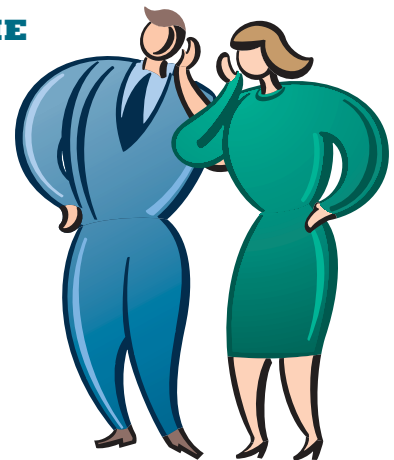
Role: The following are some of the major expectations for a substitute.

SPECIFIC RESPONSIBILITIES FOR THE SUBSTITUTE INCLUDE:

- TO BE DISCREET IN CONFIDENTIAL MATTERS.
- to have a “positive” attitude toward the school district employing you.
- to respect students with various disabilities and have a desire to work with them.
- to be sensitive to the needs of those individuals with whom you work.
- to be dependable and prompt, and able to be counted on daily.
- to be reliable and consistent in job performance.
- to show initiative.
- to use common sense when unusual situations arise.
- to be a team player.

To help the substitute maintain continuity with students, a daily schedule should be provided along with important information about individual students. It is also important to receive feedback from the substitute to provide direction and assistance for future substitutes. Included in Appendix C are forms that can be used for this purpose.

DISCRETION IN CONFIDENTIAL MATTERS IS THE RESPONSIBILITY OF ALL TEAM MEMBERS!!



VIII. EDUCATING THE PARAPROFESSIONAL

A. PROFESSIONAL ORIENTATION TO THE SCHOOL DISTRICT

Orientation for the paraprofessional to the school district procedures and policies is a first step toward making the workplace conducive to a positive working experience. General policies and procedures cover numerous topics and affect paraprofessional functioning in a variety of ways. Some of those topics include contracts, evaluations, sexual harassment, vacation and emergency leave, operating calendars, dress codes, standards of behavior, complaint procedures, fire drill procedures, smoking regulations, and school records policy. Reviewing the policy manual is essential so responsibilities can be executed appropriately. If a policy is not automatically provided, the paraprofessional should request one.

Other components to consider are:

*The time to repair
the roof is when
the sun is shining.*
—John F. Kennedy



- payroll
- transportation
- school health
- insurance
- negotiated agreements
- union affairs
- use of phones
- personnel
- universal precautions

PARAPROFESSIONAL ORIENTATION TO THE SCHOOL BUILDING

Individual buildings often have policies peculiar to that building, that affect personnel working within that building. For example, safety procedures are often specific to each work setting, and it is crucial that there is a thorough understanding of these procedures as early as possible. Such necessities as fire evacuation procedures and emergency-operating plans can be critical. Components of orientation for the paraprofessional at the school building include:

- safety and emergency procedures
- school schedules

- school handbook
- building and grounds map
- building discipline manual
- lunch and recess procedures
- accessing assistance
- using building equipment

The following checklist gives the paraprofessional an indication of the extent to which worksite policy and procedure information is needed. The checklist should be thoroughly studied initially and reviewed periodically for any changes. Although some of the suggestions may not seem very important, they can be helpful in improving the effectiveness with which the paraprofessional's job is performed.

CHECKLIST OF THINGS THE PARAPROFSSIONAL NEEDS TO KNOW

- ☐ Phone numbers of supervisor, teacher(s) and/or colleagues.
- ☐ Fire evacuation routes and other emergency procedures.
- ☐ Building layout.
- ☐ Chain of command.
- ☐ Daily/weekly schedule. (See Appendix C)
- ☐ Names of building personnel and location of pertinent offices.
- ☐ Transportation system and personnel involved with student's class or program.
- ☐ Location of fire/safety equipment and first aid supplies.
- ☐ Location and operation of equipment.
- ☐ Location of and procedures for obtaining supplies.
- ☐ Appropriate playground rules and procedures.
- ☐ Lunchroom procedures and special event procedures.
- ☐ Procedure for notifying appropriate persons in case of illness.
- ☐ Policies regarding school records.
- ☐ Current update of the paraprofessional's specific responsibilities.



INDIVIDUAL DUTIES

Improving the ease and effectiveness in the daily functioning of the paraprofessional is important because settings in which paraprofessionals function vary from school to school and supervisor to supervisor. The following checklist of things for the paraprofessional to find out will assist in helping both the paraprofessional and the supervisor communicate clearly regarding “expectations” in the workplace.

QUESTIONS TO ASK THE FIRST WEEK ON THE JOB

1. What are your special and regular duties?
2. What records are you responsible for keeping?
3. What special services are available to the classroom and the school in which you work?
4. What schedules are you responsible for following?
5. What emergency provisions apply to your situations?
6. When do pupils come? When do they leave?
7. Where and when will the pupils in your classroom play?
8. What are the most significant playground regulations?
9. For what lunchtime activities will you be responsible?
10. Where are the supplies kept and how are they obtained?
11. What equipment is available and how is it obtained?
12. What is the line of communication and authority you are to follow?
13. If you are responsible for working with more than one teacher, how is your time divided?
14. What pupil records are available to you?
15. To whom should you direct questions concerning school policy?
16. With whom should you discuss a problem concerning relationships?
17. What should your response be when parents raise questions concerning their child's functioning in the classroom?
18. What is expected of you in terms of pupil management?
19. What course should you follow if you feel you do not have enough to do?
20. How does your teacher view the teacher/paraprofessional relationship?



Similarly, this list of do's and don'ts will more clearly delineate expectations:

DO'S AND DON'TS

The Paraprofessional May:	The Paraprofessional May Not:
<ol style="list-style-type: none">1. Be left alone in the classroom for short periods of time when the supervising teacher is away. The supervising teacher remains responsible for the classroom at all times and must remain accessible.2. Work without direct supervision with individuals or groups of students.3. Have specific instructional and management responsibilities for students.4. Be involved in student planning.5. Support the integration of students with disabilities into general education programs.	<ol style="list-style-type: none">1. Substitute for a certified teacher, unless district criteria are met.2. Independently teach new concepts and skills.3. Assume primary responsibility for working with individual students.4. Be assigned to attend student CST or IEP meetings in lieu of the supervising teacher.5. Be given primary responsibility for teaching general education curriculum to students with disabilities.

B. CODE OF ETHICS FOR PARAPROFESSIONALS

Paraprofessionals are members of an educational team. As such, they maintain ongoing relationships with their teaching colleagues, parents, and many persons residing in the community. What binds those relationships is an expectation of trust that each person will perform his/her duties to the best of his/her ability following professional and ethical standards.

What binds relationships is an expectation of trust that each person will perform his/her duties to the best of his/her ability following professional and ethical standards.

The philosophy and goals of the school must be understood and reflected in the everyday working experience of the paraprofessional. By virtue of the paraprofessionals' employment in the school, they become representatives of the school and its educational program. Their interaction with the community, both on and off-school hours, requires an extreme degree of professional sensitivity. This not only extends to the confidentiality of school records, but to student testing results and family information. This is particularly true for paraprofessionals because they maintain daily contact with students and their access to extremely

personal academic and social behavior information is greatly enhanced, which necessitates their sharing confidential information only with their supervising teacher(s) and those school personnel directly involved with a student's educational program.

Further, the paraprofessional must refrain from airing school problems between and among staff, discussing personalities of administrators, teachers, and staff outside of the school environment, discussing administrative, interdepartmental, and interschool problems in the presence of students, and discussing problems with persons who are not part of the educational team.

Under the supervising teacher's direction, the management of student behavior should be fair to all the students and consistent with appropriate behavior, applicable rules and principles as determined by the school's responsible authorities.

Just as paraprofessionals should refrain from expressing differences of opinion or dissatisfaction of school policy or procedures with the community or parents, the same rule applies of refraining to engage in similar discussions with students and their families.

REPORTING CHILD ABUSE AND NEGLECT

Reporting is the most critical step in obtaining help for both the child and the family. Under Montana Law, if any school staff member has reasonable cause to suspect that a child is being abused or neglected, it remains that individual's obligation to see that the situation is reported to the local Child and Family Services Division office, law enforcement or county attorney. Reporting concerns to the principal does not satisfy the reporting requirement. School personnel must report directly to the Child and Family Services office. School personnel shall report any suspected child abuse case to one of the local Child and Family Services offices. Each district should have a policy and procedure for reporting cases of child abuse.

The following are indicators of child maltreatment: physical indicators of child abuse and neglect are usually observable. They may be mild or severe, and they involve the child's physical appearance. They may be skin or bone injuries or evidence of lack of care and attention as manifested in conditions such as malnutrition. Child abuse includes emotional maltreatment, physical abuse, neglect, and sexual abuse.

What if a child tells you about abuse or neglect? These general guidelines may help:

- Listen to what is being told to you. Do not project or assume anything. Do not push the child to share more than he or she is willing. The child needs warmth and acceptance, not curiosity or interrogation. It is not necessary at this time that the child reveal specific or intimate details
- Be supportive. Remember why the child came to you. The child needs your help, support and guidance. Be there for him or her.
- Reassure the child that he or she has done the right thing by telling you. Acknowledge the difficulty of the decision and the personal strength shown in making this choice. Make it clear that the abuse or neglect is not the child's fault, that the child is not bad or to blame.
- Keep your own feelings under control. Be calm and nonjudgmental. Do not express emotions such as shock, embarrassment, anger, or disgust. Do not criticize or belittle the child's family.
- Use the child's own vocabulary. The child may relate the abuse or neglect to you using family terminology. Do not try to substitute more polite or correct words.
- Do not promise not to tell. Know your limits. This is not a situation you can handle by yourself.
- Tell the truth. Don't make promises you can't keep, particularly related to secrecy, court involvement, placement and case worker decisions. After abuse or neglect has been disclosed, there may be actions taken over which you nor the child has control.
- Assess the child's immediate safety. Is it safe for the child to return home? Is the child in any immediate physical danger? Is it a crisis? Are there in-home protections?
- Let the child know that telling about the abuse or neglect was the right thing to do.
- Report the maltreatment to your local Child and Family Services office as soon as possible.

For complete guidelines refer to *Montana School Guidelines for the Identification and Reporting of Child Abuse and Neglect* available through the Child and Family Services division of the Montana Department of Public Health and Human Services (406-444-5900).

CONFIDENTIALITY

Confidentiality is a very important issue when delivering special education services. The paraprofessional, by virtue of the position, has access to a wealth of sensitive information pertaining to individual students. All such information is privileged and confidential, and correspondingly must be managed with extreme care. To encourage accountability to confidentiality, all team members may be required to sign off on an agreement to maintain confidentiality. An example of such an agreement can be found in Appendix D. The specific areas of confidentiality within the special education programs are:

IEP (Individualized Education Program)

The IEP becomes a part of the student's special education records and is placed in a locked filing cabinet. Only persons with a legitimate educational interest can review these records. When these records are removed from the file, the document must be signed and dated, and the reason for reviewing the records must be documented. Some special education departments encourage paraprofessionals to read the file, but only if there is a legitimate need to know pertinent information that may affect their working relationship with the student.

Having access to this IEP information goes with the understanding the information is to be treated as privileged and a matter of confidentiality.

Individualized Education Program Meetings

The paraprofessional may be asked to attend IEP meetings for students with whom they work. At these meetings, the paraprofessional may be asked to share information regarding the student in the classroom environment. At times, parents may share personal information that assists with programming, but is not documented into the IEP. This information parents share during an IEP meeting is also confidential even though it may not become a part of the official IEP minutes or records.

The School Special Education Program

The school special education program is usually very busy as so many people are involved in determining an appropriate education for a student with a disability. Conversations and consultations frequently take place between team members. Members may include school social workers, school psychologists, school health nurses, and outside consultants. Many school districts do not have private conference rooms, so conversations and meetings are held in various school areas. These comments and conversations, if overheard, are confidential and should not be discussed with others.

General Education Classroom

In the past, general education professionals were accustomed to working alone in the classroom setting for the majority of the day. Not all teachers are comfortable with another adult in the classroom assigned by the IEP team. It takes time to build a trust relationship and a confidence base with the classroom teacher. The paraprofessional's role is to support the special education students in the classroom. The paraprofessional must not discuss specific classroom or student situations with other people not having a legitimate educational interest.

Parents

Paraprofessionals will have frequent contact with parents in the school setting and the community. It is important to remember that confidentiality applies in the community at large, as well as the schools. In the past, lawsuits have been initiated by parents on behalf of students due to this breach of confidentiality. Conversations pertaining to specific students have been overheard in public areas. The best way to avoid any such confrontation is to respect the confidentiality of each student. Conversations regarding specific students must be confined to the school setting and occur only with adults directly and legitimately involved with the student.

This is not merely to act in accordance with school policy or state special education regulations, but it is a legal mandate pursuant to the Family Educational Rights and Privacy Act. This law prohibits information disclosure to anyone other than parents and school persons who have a legitimate educational interest without parent consent. The law is intended to assist in safeguarding the legal rights of both students with disabilities and their parents. Being aware of the restrictions and protection provided by the law will enable paraprofessionals to be more responsible in carrying out their prescribed duties.

**CONFIDENTIALITY IS MANDATED BY THE
FEDERAL EDUCATIONAL RIGHTS AND PRIVACY ACT.**

- C**ontrol information about the students.
- O**nly share information with those who have a need to know and who have proper authorization.
- N**ever discuss school information regarding students while attending social events.
- F**orward inquiries regarding students to teachers and supervisory personnel if you are approached for confidential information.
- I**nteract with those who inquire in a manner in keeping with your responsibilities.
- D**on't discuss student situations in the lounge with staff that have a need to know.
- E**xplanations for not discussing a student are easier than explanations for inappropriately divulging confidential information.
- N**ot sharing is caring.
- T**hink about privacy.
- I**t's important that things that happen at school, stay at school.
- A**ppropriate information exchange carries with it responsibility.
- L**earn how to handle uncomfortable inquiries in positive and courteous, but confidential, ways.
- I**dentify acceptable ways that the necessary people can access information.
- T**reat confidential information as if your job depends on it—it may.
- Y**ou are part of positive public relations for schools. Confidentiality is a cornerstone. Protect it!

Paraprofessional Connection, Eagle River WI

C. COMMUNICATION IN THE CLASSROOM

Communication is essential in all human organizations. The statement, “I think we have a communication problem here,” is frequently heard when problems emerge among people working together. This is particularly true in the classroom setting, especially when paraprofessionals work closely with teachers and other school personnel as a member of a team. Teamwork requires excellent communication because all members of the team must be willing to share their information, their ideas, and their points of view with all other members of the team. The communication process requires skills in both sharing and receiving. Teams must work hard to ensure that all team members have the information they need to do their jobs thoroughly and effectively.

The role of the paraprofessional is to assist and enable the teacher to fulfill the functions of a classroom manager. To accomplish this, communicating the paraprofessional’s administrative and instructional duties to appropriately complement and support the activities of the teacher is crucial.

Anna Lou Pickett and William Heller in their monograph titled *Effective Utilization of Paraprofessionals by Professionals (1982)* best describe how communication should work in the classroom when staff are working as a team.

NEED FOR A COMMON VOCABULARY

A major problem that may impede the development of a strong team effort between the teacher and paraprofessional is a lack of a common base of reference and understanding. Teachers and other professional personnel tend to know and use the same educational jargon in connection with student performance, assessment techniques, program planning, and educational methods. All too often, however, the jargon becomes a form of shorthand that allows professionals to communicate comfortably with each other while excluding others from participating in the educational process (e.g., parents, students, paraprofessionals).

NONVERBAL CUES

In addition to the need for the instructional team to develop and strengthen verbal communication skills, they also need to develop a set of nonverbal cues that will enable them to reduce disruptions in all phases of the daily routine. By systematically using silent cues that do not require oral directions and responses to problems in the midst of instructional activities, the team will be able to increase productivity, operate more efficiently in a crisis situation, and establish a positive approach to communication in the classroom.

*The most valuable
of all talents is never
using two words
when one will do.
—Thomas Jefferson*

SCHOOL ORIENTATION

The teacher needs to clarify the structure, the methods, and the techniques she/he prefers to use in all phases of classroom and program management for the paraprofessional.

TEACHING STYLE

Teachers, like everyone else, are people with unique characteristics and ways of doing things. These characteristics are rarely given much thought by the teacher because they are such an integral part of the individual's teaching style; but for someone in a support role (in this case the paraprofessional), it is imperative that they know as much about these characteristics as possible.

Without mutual awareness and understanding of these idiosyncrasies, the effectiveness of the team will be undermined.

Every teacher has a style of his or her own. It may be one acquired from training, observing a role model or it may have been developed over a number of years of on-the-job experience. The style may be flexible, controlling, permissive and/or a combination of all of these. One person may be very structured and provide specific directions based on rules, procedures, and program and classroom structures developed by the teacher. Another person may ask the paraprofessional to share ideas and information and participate in the decision-making/planning process.

Yet another person may tend to be nondirective and prefer the paraprofessional to learn by observing what the teacher does and then to model the behavior. Without mutual awareness and understanding of these idiosyncrasies, the effectiveness of the team will be undermined. The following are descriptions of several items to which the teacher and paraprofessional must address.

- **Discipline Strategies**

Discipline is, for most teachers, something that they hold very close and very dear to themselves. Many times their discipline style is known only to them. Often it will require a lot of tolerance and an understanding on the part of the paraprofessional to accept why the teacher disciplines one child in one way and another child, exhibiting almost the same behaviors, in quite another way. This also suggests how important it is for the teacher to explain to the paraprofessional why one student requires one disciplinary strategy and another does not. Discipline is a hard area to understand and agree upon, but if it is not understood, it can lead to major problems and complications between the professional and paraprofessional.

- **Instructional Techniques**

Teachers need to make an effort to provide the paraprofessional with information about the techniques that are part of their teaching repertoire and reasons why they are used with particular groups or individuals in specific types of situations. By doing so, the teacher will enable the paraprofessional to more fully understand why a teaching procedure relates to the type of content or the particular type of grouping procedure that might be used in the classroom.

Teachers, almost like good mechanics, have their favorite tools. Why particular tools are favorites is known only to them, but the fact remains, it is a favorite. Most teachers have an array of teaching procedures and techniques they like to use. It

may be topic related, skill related, or concept related. Some teachers rely very heavily on the lecture, others will rely on self-instruction or auto-instruction, whereas others will rely on more incidental types of instruction such as learning centers and/or various types of project methods. Some will make use of media and others will utilize very little media; and some will involve students in planning their own educational programs, as well as developing activities that will encourage students to practice the skills they learn in real-life settings.

- **Classroom Organization and Rules**

Both structure and rules are integral components of the strategy of discipline and behavior management utilized in the classroom. Structure or a lack of it will very often determine the type of discipline that is experienced by the youngster in the classroom. For example, an open classroom setting places considerably more responsibility on the student to determine the course of his/her behavior than a very structured or traditional classroom setting does.

The paraprofessional must be familiar with why the teacher has chosen a particular structure and why and how it complements the instructional delivery and/or process. Structure can be extremely important to some teachers and a failure on the part of the paraprofessional to recognize the value of such structure may cause major problems between the teacher and the paraprofessional. The paraprofessional must, like the students, learn to adjust to the structure within which the teacher is most comfortable. It is the responsibility of the teacher to help the paraprofessional understand and accept the structure he/she prefers.

The difficulty with rules is that some are formalized and written, and others are informal and unwritten. It is the unwritten rule or unspoken rule that causes the most difficulty. Oftentimes, it is difficult for both the paraprofessional and students to comprehend fully what these rules are and how they are being applied. The teacher is generally the only one who knows what these unwritten rules are, and no one can be held responsible for communicating them to the paraprofessional other than the teacher.

Again, rules like classroom structure are products of what the teacher deems to be appropriate for management of the instructional setting. Over time, it is very likely that the paraprofessional will help to develop the rules for a given classroom, as well as support their enforcement. Whether or not paraprofessionals have been involved in developing the rules, it is their responsibility to see that they are enforced consistently and in accordance with the teacher's expectations.

By clarifying these components of the teaching process, the teacher will "demythologize" teaching and establish a pattern of open communication that will lead to the development of a strong interpersonal relationship with the paraprofessional and other support personnel.

D. ORIENTATION TO SPECIAL EDUCATION

THE SPECIAL EDUCATION PROCESS



The world of special education consists of a sometimes rather complicated and lengthy process to identify, evaluate, place, develop and periodically review an appropriate education program for a student with special learning needs. The process is accomplished according to a prescribed method that operates under federal and state laws designed to guarantee students with disabilities a free and appropriate public education as close to the regular education program as is possible. Special education affirms the right of parents and the student, if appropriate, to be part of the decision making at every stage of the process. This special education process usually develops according to a defined sequence as follows:

- **Prereferral**

The prereferral process is a function of general education and occurs before any official referral is made to special education. Each school is to provide a structured support and assistance to general education teachers in identifying and meeting diverse student needs. A team of classroom teachers, special services staff, administrators and parents, as appropriate, provides this structured support and assistance. (Special services staff may include special education teachers, Title I teachers, school psychologists, speech and language pathologists, paraprofessionals, counselors, etc.) This team provides a framework for considering a full range of alternatives for addressing student needs.

Prereferrals are appropriate when:

1. Persons working with the student recognize that there is a problem;
2. Screening information suggests a problem; or
3. A parent expresses concern.

The prereferral process clarifies the problem and develops effective general classroom activities, programs and strategies for the student.

- **Referral**

Referral is a specific request to conduct a multidisciplinary comprehensive evaluation. Schools have a referral process that includes a method for collecting information to determine whether a comprehensive education evaluation is necessary and the types of options the school considered, and of evaluations warranted. It comes after the prereferral process when less restricted interventions have been attempted. The referral is usually completed by the teacher who uses the information gained during the prereferral process. However, referrals may be initiated by others, including parents and students. The referral includes a statement of the reasons for referral and a description of any, including documentation of general education interventions (prereferral process).

Referral documents the suspicion that the student may have a disability that adversely affects the student's educational performance to the degree that requires special education and related services.

- **Evaluation**

Before a student receives special education services, he or she must be identified as a student with a disability and in need of special education. In order to do that, a full and individual evaluation of the student's educational needs must be conducted. Before conducting this comprehensive educational evaluation, the school must obtain written parental consent. The evaluation process for identifying students with disabilities must be comprehensive, nonbiased, and multidisciplinary in nature. The student must be assessed in all areas related to the suspected disability, including, where appropriate, health, vision, hearing, social and emotional status, general intelligence, academic performance, communicative status and motor abilities. Student assessments may include the use of informal assessments, standardized tests and classroom observations.

Like the instructional plan, the evaluation should be individualized. A comprehensive evaluation not only meets administrative and statutory requirements, it yields instructional relevant information that is utilized by the Child Study Team.

- **Child Study Team (CST)**

After written permission is received, the evaluation process begins. A transdisciplinary team must determine if the student meets disability criteria and is eligible for service. The Child Study Team (CST) is commonly referred to as the transdisciplinary team because each team member has a specialized area of expertise. The CST uses and integrates a range and variety of knowledge and skills. The CST is asked to consider evaluation information in order to determine a child's eligibility and need for special education services and to recommend educational placement. The CST assures that needed information is available, including the educational needs of the child and the capabilities of the educational program. The CST key functions may be seen as providing for the gathering of student evaluation data, determining if a disability is present, planning and or making placement recommendations, and providing for program implementation and follow-up.

- **Individual Education Program (IEP) Team**

If a student qualifies for special education services, another transdisciplinary team is formed consisting of many, but not necessarily all, of the same people as on the CST. This team is referred to as the Individualized Education Program (IEP) team. The student's IEP is a legal document written in relation to the student's needs. This unique program for each eligible student includes present level of performance,

goals/objectives/benchmarks, related services and supplemental aids and services. Classroom accommodations and modification strategies are defined. It must be designed to deviate from the regular education program only to the extent that is absolutely necessary when making student program placements and other educational decisions.

ADDITIONAL INFORMATION REGARDING THE TRANSDISCIPLINARY TEAMS (CHILD STUDY TEAMS AND INDIVIDUAL EDUCATION PROGRAM TEAMS)

The composition of the transdisciplinary teams varies according to the age, type, and severity of the student's disability. The core team members who make decisions regarding special education, eligibility, placement, and development of Individual Education Programs are:

- a school administrator,
- the special education teacher,
- a general education teacher,
- one or both of the student's parents and the student, if appropriate, and
- a knowledgeable person or persons in the suspected area of disability such as the school psychologist, speech language pathologists or audiologists, physical therapist, occupational therapist, teacher of the deaf and hard of hearing, braille or orientation and mobility specialist, and the vocational education teacher or consultant.

Because of his/her knowledge of the student, the paraprofessional's input can prove invaluable.

Additional participants may be the school health nurse or health assistant, the school social worker, the adaptive physical education teacher, the classroom paraprofessional, and other personnel as needed. Because of his/her knowledge of the student, the paraprofessional's input can prove invaluable.

DISABILITIES

Most persons who interact with students who have a disability or disabilities have difficulty distinguishing between the students and their disabilities. They are children or young adults first, who often exhibit a wide variety of "normal" and appropriate intellectual, social, emotional, and recreational behavior most of the time, but because of their disability have a disadvantage to fully benefit from their learning experiences as students in the school environment. In keeping with this discussion, an individual with a disability is always referred to as an individual first and the disability is secondary. Therefore, a student in special education is not referred to as a "learning disabled student,"

**PEOPLE FIRST
LANGUAGE**
An individual with a disability is always referred to as an individual first and the disability is secondary, e.g., "student with a disability" instead of "disabled student."

but rather a “student with a learning disability,” or a “student with a behavior disorder,” or “a student with a cognitive delay.”

Each student’s disability is as unique as each sibling within a family. Although characteristics between and among disabilities may appear to overlap, there is really no typical student with a learning disability, cognitive, motor, or language impairment. Further, each disability may range from mild to severe and some disabilities may have a progressive developmental regression. Some of the most common disabilities acronyms used in special education will follow. Paraprofessionals should understand these disabilities and acronyms to better relate to the working environment. Kathy Kelker in *Montana Parent’s Guide to Special Education* defines the disabilities as follows.

AUTISM (AU)

A developmental disability that significantly affects verbal and nonverbal communication and social interaction, that is generally evident before three years of age, and that adversely affects a child’s educational performance. Other characteristics often associated with autism are engagement in repetitive activities and stereotyped movements, resistance to environment change or to change in daily routines, and unusual responses to sensory experiences. The term does not apply if a child’s educational performance is adversely affected primarily because the child has a serious emotional disturbance.

CHILD WITH A DISABILITY (CWD)

A child evaluated in accordance with the regulations of the Individuals with Disabilities Education Act as having cognitive delay; hearing impairment, including deafness; speech or language impairment; visual impairment, including blindness; emotional disturbance; orthopedic impairment; autism; traumatic brain injury; other health impairments; deaf-blindness; multiple disabilities; or specific learning disabilities; and who, because of those impairments, needs special education and related services. A child who is 5 years of age or younger may be identified as a child with a disability without the specific disability being specified.

COGNITIVE DELAY (CD)

A condition characterized by significantly subaverage general intellectual functioning existing concurrently with deficits in adaptive behavior and manifested during the developmental period that adversely affects a child’s educational performance.

DEAF-BLINDNESS (DB)

Concomitant hearing and visual impairments, the combination of which causes such severe communication problems and other developmental and educational problems that the problems cannot be accommodated in special education programs solely for children with deafness or for children with blindness.

DEAFNESS (D)

A hearing impairment that is so severe that the child is impaired in processing linguistic information through hearing, with or without amplification, in a manner that adversely affects the child's educational performance.

EMOTIONAL DISTURBANCE (ED)

A condition exhibiting one or more of the following characteristics, to a marked degree, and over a long period of time, that adversely affects educational performance:

- an inability to learn that cannot be explained by intellectual, sensory, or health factors.
- an inability to build or maintain satisfactory interpersonal relationships with peers and teachers.
- inappropriate types of behavior or feelings under normal circumstances.
- a general pervasive mood of unhappiness or depression; or a tendency to develop physical symptoms or fears associated with personal or school problems.

The term, emotional disturbance, includes schizophrenia. The term does not include social maladjustment, unless it is determined that the child is emotionally disturbed.

HEARING IMPAIRMENT (HI)

An impairment in hearing, whether permanent or fluctuating, that adversely affects a child's educational performance, but that is not included within the definition of deafness.

ORTHOPEDIC IMPAIRMENT (OI)

A severe orthopedic disability that adversely affects a child's educational performance. The term includes, but is not limited to, impairment caused by congenital anomaly (e.g., clubfoot or absence of some member), impairments caused by disease (e.g., poliomyelitis or bone tuberculosis), and impairments from other causes (e.g., fractures or burns that cause contractures, amputation, or cerebral palsy).

OTHER HEALTH IMPAIRMENT (OHI)

A condition characterized by limited strength, vitality, or alertness because of chronic or acute health problems such as a heart condition, attention deficit disorder, tuberculosis, rheumatic fever, nephritis, asthma, sickle cell anemia, hemophilia, epilepsy, lead poisoning, leukemia, or diabetes that adversely affects a child's educational performance.

SPECIFIC LEARNING DISABILITY (LD)

A disorder in one or more of the basic psychological processes involved in understanding or in using language, spoken or written, that may manifest itself in an imperfect ability to listen, think, speak, read, write, spell, or do mathematical calculations. The term includes, but is not limited to, such conditions as perceptual disabilities, brain injury, minimal brain dysfunction, dyslexia, and developmental aphasia. The term does not include children who have learning problems that are primarily the result of visual, hearing, or motor disabilities, cognitive delay, or environmental, cultural, or economic disadvantages.

SPEECH-LANGUAGE IMPAIRMENT (SLI)

A communication disorder such as stuttering, impaired articulation, or a language or voice impairment that adversely affects a child's interpersonal relationships or educational performance.

TRAUMATIC BRAIN INJURY (TBI)

An acquired injury to the brain caused by an external physical force, resulting in total or partial functional disability or psychosocial impairment, or both, that adversely affects a child's educational performance. The term does not apply to brain injuries that are congenital or degenerative or to brain injuries induced by birth trauma.

VISION IMPAIRED (VI)

An impairment that, after correction, adversely affects a child's educational performance. The term includes both partial blindness and blindness.

E. INTERACTION OF THE PARAPROFESSIONAL WITH TEAM MEMBERS

Following are condensed descriptions of what roles various persons are assigned within a special education program and how paraprofessionals usually interact with these staff members.

SPECIAL EDUCATION TEACHER

In addition to providing the basic instructional program for students with disabilities, the special education teacher is responsible for academic testing and student observations. When a student qualifies for placement, the special education teacher oversees the implementation of the student's program. Each special education teacher is responsible for a specific group of students. The special education teacher is usually the case manager of the transdisciplinary team. Special education teachers generally, but not always, provide direct and consultation services for students with whom they hold the appropriate licensure.

The special education teacher is the first person with whom the paraprofessional will have contact, although paraprofessionals may work with one or several special education teachers throughout the school day. The special education teacher's role is to define the paraprofessional's job and provide basic guidelines and expectations for each student. The special education teacher provides assistance with the development of appropriate modifications, that will implement the Individualized Education Program (IEP). The special education teacher is responsible to see that the student's IEP is followed precisely. Questions regarding a student's program should be directed to the special education teacher.



GENERAL EDUCATION TEACHER

The general education teacher usually initiates the special education referral to the special education program alone or in conjunction with the parent if it is determined that all reasonable accommodations within the regular classroom environment are not working or are not appropriate for the student. The teacher has a wealth of valuable information regarding academic progress and the social-emotional well-being of the student.

Information regarding organizational skills, work habits, and processing of information and language is also provided by the general education teacher. Once this information is compiled, a team decision is made whether to evaluate the student. The teacher's information helps to determine which specific areas should be assessed.

The paraprofessional usually has a unique and special working relationship with the general education teacher or teachers when students are included in the regular classroom for a larger part of their instruction throughout the day.

The teacher sets the rules, guidelines, and expectations for the classroom. The expectations will be different for each classroom in which the paraprofessional works. The classroom teacher provides instruction. The paraprofessional's role in the classroom varies depending upon the unique needs of the learner and the IEP. It may include behavior management, reteaching or reinforcing skills, working with students in small groups, reinforcing self-help skills, assisting with mobility, and modifying curriculum collaboratively with the general and special education teachers.

ADMINISTRATOR

The school administrator and/or the special education director are members of every transdisciplinary team. The administrator makes administrative decisions, provides assistance with student schedules, coordinates inservice for staff and provides support in the development of agreed-upon educational alternatives.

Although the paraprofessional generally does not receive directions from the school administrator, a positive working relationship as a team member should be cultivated. If questions arise regarding the role of the paraprofessional with a particular student or group of students, these questions need to be directed through the special education teacher.

PARENT OR GUARDIAN

The parent or guardian is involved in each step of the educational process. To place a student in special education, a signature must be obtained. The parent or guardian provides critical information relative to their child's strengths and limitations. Information relating to health, social, emotional, and other pertinent data contributes to the development of an appropriate educational program.

The case manager will define the paraprofessional's role in relation to the parent. The paraprofessional may be responsible to keep a daily notebook with the parent. This notebook might include a daily activity update, a log of homework assignments, general comments regarding the day, or comments about the student's behavior. The special education teacher communicates to the paraprofessional what and how to report these items. The paraprofessional may also be asked to communicate with the parent by telephone on a regular basis.

OTHER TEAM MEMBERS AS NECESSARY

The teacher for the deaf and hard-of-hearing: This teacher is responsible for the assessment of students who are hard-of-hearing. Hearing losses range from mild to severe. The role of the hearing teacher is to provide direct instruction to the student and ensure hearing aids and other adaptive devices are working correctly. Some students may require the services of a sign language interpreter who also works under the supervision of the teacher. The teacher of the deaf and hearing impaired is available to inservice staff and assist with strategies and ideas to accommodate the student within the regular classroom environment. Paraprofessionals may become part of a student's accommodation plan in regular education.

The teacher or consultant for the visually impaired: Vision impairments of students may range from low vision to legally blind. It is the job of the visually impaired teacher or consultant to assist students having vision impairments with direct instruction. This teacher also supplies the general education class with enlargements, audio cassettes, large print books, materials in Braille, and inservice for paraprofessionals who may be assigned to students with visual impairments in the general classroom. It is their job to work closely with the teacher or consultant for the visually impaired and follow accommodation directions.

The vocational education teacher: At the secondary-school level, the vocational education teacher or consultant provides valuable information regarding the students with disabilities work and career potential. This teacher offers job counseling, exposure to various jobs, assists with job placement, and acts as a job coach. Under the direction of the vocational teacher or consultant, paraprofessionals are asked to assist students with the acquisition of skills necessary for job placement and monitoring job performance, always providing direct feedback to the supervising teacher.

The school psychologist: The school psychologist's expertise is in the administration and interpretation of standardized tests. The cognitive ability tests (intellectual functioning tests) are administered and scored by the school psychologist. In addition, observation of students, family history, and compilation of student data may be completed by the psychologist. The psychologist is able to assist with the design and implementation of interventions and behavior management systems. The school psychologist also acts as a resource for the building staff. The school psychologist may contact the paraprofessional for observations regarding individual students. The paraprofessional may, after consulting with the special education teacher, contact the school psychologist for information about child development, learning styles, or recommended reading materials on specific disabilities.

The school social worker: The school social worker acts as a liaison between the home, school, and community agencies. The school social worker may counsel students and families, assess the effects of a student's home life on school performance, and assist families in emergency situations. The social worker is often able to contribute valuable information regarding the student's social and emotional well-being that may impact the student's ability to learn. The paraprofessional may be contacted by the social worker for observations regarding specific students. If a student shares information with the paraprofessional regarding his or her safety, well-being, or family situations that may be harmful to the student, it should be reported immediately to the supervising teacher and, at the teacher's discretion, to the school social worker or school administrator.

The school health nurse or health assistant: The school nurse assists in performing much of the general health screening for students in the school. Screening for vision and hearing is frequently the school health nurse's responsibility. In addition to screening, immunization records are received and explanations of medical records and conditions are provided. The school health nurse also monitors prescription medicine, teaches specific health care skills, checks the fit, maintenance, and function of prosthetic and adaptive devices, and assists parents with medical referrals. The paraprofessional will be involved with the school health nurse or health assistant daily if a student takes medication, requires daily medical attention, or uses prosthetic and adaptive devices. If a student has an emergency medical plan, the school nurse will be able to clarify the procedures for the paraprofessional.

Speech-language pathologist: The speech-language pathologist determines whether or not the student's use of speech and language affects learning in the classroom. The speech-language pathologist's main role on the transdisciplinary team is to assess students for speech and language disorders. If the student is eligible for services, the speech-language pathologist works with the student to remediate articulation, voice, language, and fluency disorders. One of the most important tasks for the speech-language pathologist is to assist with fostering communication skills in the general classroom environment. Supplemental materials and specific exercises to be implemented within the general education setting may be provided to the paraprofessional to assist with this task. The speech-language pathologist can also provide ideas and materials for the reinforcement of language skills.

Physical and occupational therapists: The physical therapist (PT) focuses on the assessment, training, and use of the lower extremities and large muscles. The occupational therapist (OT) focuses on the upper extremities and fine motor abilities. Both therapists can offer suggestions for the modification and the adaptations of materials. Special equipment may be provided and in most cases the paraprofessional will be trained with the use of these devices. Recommendations regarding the general classroom environment and suggestions for student accommodations should also be provided to the paraprofessional. Paraprofessionals will be spending large quantities of time with the students and their observations are valuable to the therapist.

IX. TIPS FOR TEAM BUILDING, COMMUNICATION, AND PROBLEM SOLVING

Thomas Kaiser discusses the concept of “Mining Group Gold” in many of his writings concerning the development of the necessary processes for building teams that work successfully to achieve common goals. In today’s schools, “mining group gold” has become a way of doing business, not only in special education with individual education planning, but also for school support teams in regular education. Consequently, it is necessary to place a major focus on improving communication through collaboration and teamwork. Appropriately, educating students with disabilities greatly increases this focus, as so frequently these students present complex problems requiring numerous school staff members, including paraprofessionals, to problem solve and work together cooperatively identifying and working toward achieving common educational goals. Working together to achieve common goals necessitates forming a relationship having four essential characteristics:

1. good communication,
2. trust,
3. respect and recognition, and
4. collaborative problem solving.

Successful teams rarely achieve these characteristics through some preservice training package. Such training is typically offered in isolation of the actual working together as a team. Rather, these characteristics are developed during the process of focusing on common problems and solutions for students. Communication, trust, respect, recognition and collaborative problem solving develop as professionals and paraprofessionals grow together. Their growing as a team emerges with the knowledge that they are achieving the best results for students and these student outcomes are the shared concerns of every team member.

Use what talents you possess: the woods would be very silent if no birds sang, except those that sang best.
—Henry Van Dyke

Following are “tips” or suggestions paraprofessionals should consider in developing essential characteristics required for becoming a successful team participant.

A. TIPS FOR DEVELOPING GOOD TEAM COMMUNICATION

(Adapted from Pickett and Gerlach 1997)

- **Adopt Common Purposes:** Teams are goal oriented and united in their communication effort to achieve their goals.
- **Pay Attention:** Focus on active listening using eye contact, head nods, and smiles to assure the speaker that he/she is being heard.
- **Listen Empathetically:** Take time to hear the whole message. Do not draw premature conclusions. Listen for ideas, feelings and intentions, as well as facts. Get inside the other person's frame of reference. Listen with eyes, ears, and heart. Seek first to understand, then to be understood. (Covey)
- **Check for Understanding:** Utilize nonjudgmental paraphrasing of words the speaker is using to avoid misunderstandings and misinterpretations of the speaker's message.
- **Avoid "Pseudo Listening:"** Keep from prematurely interrupting before a speaker has finished. Avoid rehearsing your message. Keep listening to what the speaker is attempting to convey. Keep away from engaging in selective listening or hearing only what you want to hear or what you anticipate someone will say. Don't focus on points of disagreement.
- **Actively Listen:** Empathize with the speaker. Make efforts to establish an accepting, respectful climate that encourages speakers to be more comfortable, revealing thoughts and ideas to the listener.

*The main thing is to keep the
main thing the main thing.
—Steven Covey*

B. TIPS FOR DEVELOPING TRUST RELATIONSHIPS

- Members of the team must adopt the team concept and perceive themselves as valued and integral parts of the team.
- Teams must be confident that by their willingness to work together they will reap numerous benefits from the teamwork and increase their commitment to making the team process work.
- Teams must support one another. This is demonstrated through the realization that there is a team unity of purpose toward achieving goals.
- Team members recognize that behavior norm expectations include arriving on time, being prepared, asking appropriate questions, listening to one another, maintaining a positive attitude, and generally demonstrating skills of effective communication, respect, and integrity.
- Manage naturally occurring conflicts in such areas as determining student's needs, parent's desires, scheduling, using different teaching methods and evaluating student success by first understanding the nature of the conflict and being dedicated to a conflict resolution strategy centered around collaboration.

*Remove price tags from people.
Everyone has worth; the excitement
lies in the discovery of their value.*

C. TIPS FOR DEVELOPING TEAM MEMBER RESPECT AND RECOGNITION

- Role clarification or distinctions of all team members must be understood and appreciated by all team members. Just as individual team members know their roles in getting tasks done and how to use the skills and expertise of each member most effectively, so do all team members need to understand the roles and responsibilities of team members in such areas as experience base, training, time constraints, and comfort level regarding assignments.
- Team Leadership must be accepted and invited if paraprofessionals are to make optimal use of their strengths and resources. Effective team leaders are able to help paraprofessionals focus on the overall goals of students' programs, provide direction and ideas helping to identify educational alternatives, and give continual feedback regarding effectiveness of various educational approaches.

Effective leadership skills are comprehensively described in Pickett and Gerlach's excellent book titled *Supervising Paraeducators in School Settings: A Team Approach*.

The Effective Team Leadership Skills are as follows:

- **Teamwork skills:** The ability to interface with the paraprofessional in a manner that promotes teamwork and develops commitment.
- **Communication skills:** The ability to provide and receive information in an effective manner.
- **Problem-solving skills:** The ability to identify problems and purpose, evaluate and analyze alternative solutions, and develop ways of implementing the plan.
- **Interpersonal skills:** The ability to recognize and demonstrate appropriate social behaviors, work with different interpersonal styles, appreciate the uniqueness of others, and manage conflict.
- **Feedback skills:** The ability to monitor performance of the paraprofessional through appropriate observation and feedback to ensure team effectiveness.
- **Technical and management skills:** The ability to understand the mission of team and program. The supervising professional must schedule, plan and manage time, and handle the unexpected.
- **Delegating skills:** The ability to communicate responsibilities effectively to the paraprofessional.
- **Coordinating and planning skills:** The ability to see that roles and responsibilities are scheduled appropriately, resources are available when needed, and conferences and meetings are used to their fullest advantage.

Professional and Personal Behaviors may act as barriers that impede effective teamwork.

All team members are affected by the structure of their organization or agency in which they work. Agencies are designed to promote certain values and to achieve specified goals or missions. The individual professional takes his/her cue regarding appropriate professional behavior from the organizational structure and value system, as well as from those who are in leadership roles within the organization.

Professional barriers to teamwork are usually present in most work situations. As teams begin to meet, members discover they are separated by specialized educational preparation. Each person brings not only a professional but also a personal point of view that was learned in a specialized inservice or preservice training program or through on-the-job experiences. Team members may experience role ambiguity in that they do not have a clear understanding of what is expected of them as members of a team. Status differentials may also exist and certain team members may be perceived as being more or less competent merely based on their professional status, and may not be corrected if team leadership is not sensitive to some of the attitudes of team members. Specific personal behaviors may also impede teamwork and again leadership styles will dictate the effectiveness of the team. Leaders may exhibit authoritarian or directive leadership styles that may present a barrier to the team doing its

job. Team members may sometimes compete with one another for influence, status, control, power, and resources. Utilization of all the resources of team members results in “knowledge is power.” Team members need to share their information so that appropriate decisions can be made. Interpersonal conflicts cannot be allowed to present barriers. Those conflicts need to be resolved in an effective and productive fashion in the best interests of achieving student goals.

*If you want people with you
when you land, they have to be
with you when you take off.*

Care and Commitment often emerge from the interactions that occur among the team members as they work together toward common goals. Paraprofessionals feel commitment before they become members of teams. If they did not, they would probably not have chosen a career in serving other people. However, teamwork produces new

levels of caring and commitment not only to one’s students, but also to one’s team members. In the process of working closely with other professionals to develop a plan that reflects shared values and goals, teams are often able to experience a depth of professional relationships that are extremely satisfying and meaningful.

D. TIPS FOR DEVELOPING COLLABORATIVE PROBLEM SOLVING

Pickett and Gerlach's book, *Supervising Paraeducators in School Settings: A Team Approach*, best illustrates a step-by-step summary of a variety of problem-solving strategies that have been developed to meet the needs of school professionals and paraprofessionals who work together to achieve successful individual school programs for students.

The first of these steps is defining the problem. This involves analyzing what specifically appears to be inhibiting the teaching/learning process and what factors appear to be contributing to the problem. Other aspects of the problem are situations in which the problem occurs, persons involved, and how learning is affected.

Team members focus on these components of the problem individually and then discuss together their concepts of what appears to inhibit successful learning from occurring and draft a statement describing the problem and the contributing conditions that perpetuate the problem.

The second step involves determining the needs of a situation and clarifying the overall desired learning outcomes. This does not mean immediately developing a solution, but rather exploring what the team desires to happen for the student. This also includes determining the needs and locating resources. Most importantly, it involves identifying what total team, parent, and student communication needs must be addressed to affect change. The final step is to describe a predicted overall outcome of the proposed improvements in the student's teaching/learning situation.

Learn to bend. It's better than breaking.
—Anonymous

Utilizing a team focus enables an agreement to be achieved among the group as to what are the desired results for the student. This helps bring team members collectively to a positive and future-oriented approach.

The third step is considering alternative problem solutions as a group. This is an effective strategy to enable all team participants to consider various team members' suggestions. A method to achieve this generation of ideas involves documenting the alternatives over a period of time without prematurely foreclosing on anyone's thoughts and encouraging all team members' participation.

The fourth step involves selecting a solution or solutions having the greatest chance for achieving desired outcomes. This process requires the team to examine each alternative solution and determine which solution most effectively accomplished the following criteria: (a) meets the prescribed needs and achieves the desired outcomes, (b) the solution easiest to implement, (c) a solution within the team's control and resource allotment and (d) a solution that is least disruptive of the teaching/learning process in the classroom.

Team discussion of these and similar questions generates group acceptance of problem solutions. This enables team members' ideas and contributions to be carefully considered and valued.

The fifth step involves an action plan designating precisely what action is to be performed by whom, where, and when. Best practice is to commit the plan to writing for all team members. This facilitates accountability for persons responsible for achieving the goals of the plan.

The sixth step involves implementing the plan so that each team member is responsible for tasks according to a specific time frame. Again, for the benefit of the team, the action plan should be committed to writing and be detailed enough so the team is aware of required resources, materials, equipment communications, schedules for implementation, and a time or times necessary to review the results of the interventions.

***Unity cannot be taken
for granted.
—Jomo Kenvatta***

Team members have a continuing responsibility to monitor results and suggest modifications to better achieve desired results. At a specified time, the team needs to meet to consider if the original program outcomes are being achieved and if new or other problems and solutions need to be designed.

A structured approach to teaming, such as has been suggested, respects the professional's and paraprofessional's time and effort, is goal oriented, and enables all team members to contribute their wisdom collectively in the best interests of student success. Most importantly, the entire process of mutual problem solving fosters cooperative working partnerships between school professionals and paraprofessionals. It is goal oriented to effectively use their time and effort, and enables all team members to contribute their wisdom collectively in the best interests of student success. Most importantly, the entire process of mutual problem solving fosters cooperative working partnerships between school professionals and paraprofessionals that becomes "a way of doing business" in managing a student's learning difficulties in the school setting.



X. TIPS FOR INSTRUCTIONAL TACTICS

There is a compelling reason for paraprofessionals to understand that much of classroom teaching involves a highly personalized style unique to each individual teacher coupled with a variety of teaching methods or techniques about which the teacher experiences a certain level of comfort. It is essential that the paraprofessional is sensitive and knowledgeable regarding this teaching style and offers parallel instruction to ensure students are receiving similar presentations of materials.

Just as teachers are unique and personalized in their style, the students, especially students with disabilities, have very different educational needs. Special education by definition is “individualized education” which means using individual methods for the unique learning needs of individual students. Some students have varying rates of learning, needs for repetition, attention and distraction threshold, auditory, visual, and tactile modes of learning and special requirements for hand-crafted materials to facilitate their learning.

*Special education is
“individualized education”
which means using individual
methods for the
unique learning needs of
individual students.*

Basic to all instructional tactics shared by the teacher and the paraprofessional is the need to be absolutely on target regarding the educational goals and objectives for all of the students as a group and each student individually. To consistently follow specific goals and objectives, paraprofessionals must not only be excellent observers and recorders of student behavior, but engage in frequent and open communication with the supervising teacher continuously throughout the school year.

- Paraprofessionals need to become proficient in the following specific instructional tactics:
 - ✓ Managing student behavior
 - ✓ Students' learning styles
 - ✓ Accommodation and adaptive strategies
 - ✓ Individual and small group instruction
 - ✓ Assessing student progress

Each of these tactics will be comprehensively addressed with the intent to provide the paraprofessional with a good working knowledge of strategies that will be helpful to facilitate the learning process.

A. MANAGING STUDENT BEHAVIOR

There are many different approaches to managing behavior. The behavior being addressed may be general types of behavior that are expected of all students, i.e., following classroom rules. It may, however, be behavior that is specific to one student that is addressed in a student's Individual Education Program (IEP). In managing students' behavior, it is important to understand each person's role. The paraprofessional's role is one of a support person. The paraprofessional is to follow the lead of the teacher, and to support his/her type of behavior management. It is important that the paraprofessional's approach to behavior management be consistent with the teacher's approach.

Here are some guidelines-at-a-glance that have been adapted from *Creating Positive Behavioral Supports* by Barbara J. Ayers and Deborah L. Hedeon.

GET A LITTLE HELP FROM YOUR FRIENDS

An effective approach to managing behaviors is to create a "problem-solving team" that works together to focus on the specific needs of the student. Often, it is easier for people who are not directly involved on a day-to-day basis to provide new ideas or help you refocus your energy where it will be most beneficial. It is best if the members of the team know the student well and can spend some time with the student. An example of a problem-solving team could be the classroom teacher, the paraprofessional, the special education teacher, the school psychologist and the parent. It is also important to consider the student as a member of the problem-solving team, as well as classmates.

ESTABLISH SHARED EXPECTATIONS THAT ARE POSITIVELY STATED

It is important for a problem-solving team to have a shared vision of the student's goals and objectives. It is often easy to identify the things you wish the student would not do; yet, it is important to determine the positive behaviors you want the child to learn. Behavioral programs should be centered around these positive behaviors versus what you want the student to stop doing.

UNDERSTAND YOUR POSTURE OR ATTITUDE

Although it is difficult to remain calm and supportive when a student is "pushing our buttons," it is exactly at that time when we must remain stable and continue to provide positive direction to the student. There are four different "postures" or "attitudes" that guide how we react in times of crisis:

Overprotective communicates a message that a student can do whatever he would like and that there are no boundaries. "I just don't want to rock the boat."

Mechanistic strictly sticks to established rewards and consequences without ending to accommodate a student and possibly prevent problems from occurring or getting worse.

Authoritarian often relies on negative consequences in an effort to shape a student's behavior. This is when the teacher is the "boss" and the student better follow the rules or he/she will be in big trouble!

Respect, Relationship and Solidarity communicates "we are in this together." This posture resolves conflict actively with the student by providing direction and positive support.

CONSIDER THE MESSAGE BEHIND THE BEHAVIOR

Behavior is most often an attempt to communicate. We need to try to understand the message behind the behavior in order to respond in a productive manner. Students may be using behavior to communicate these different messages:

Attention ("Hey, give me some recognition!")

Power ("Give me some control!")

Escape ("I need some more freedom!")

Play ("Let's have some fun!")

Self-regulation ("Ah! That feels better!")

*The person who rows the
boat generally doesn't
have time to rock it.
—Anonymous*

The goal in identifying the communicative intent of the behavior is to identify alternative ways for the student to communicate the same message appropriately.

HELP THE STUDENT FEEL A SENSE OF CONTROL OVER THE ENVIRONMENT

Teachers who are most successful in working with students who have difficult behaviors have found that, although they need to provide overall structure and establish clear boundaries and expectations, they can also provide many opportunities for students to feel a sense of control throughout their school day.

Choices—A student can be given control by being allowed to make choices within an activity (e.g., what materials to use) and between activities (e.g., what he/she wants to do now). A student can also choose with whom he/she wants to engage in activities and where he/she would like to complete activities.

Schedules—A specific, daily schedule allows a student to know the flow of activities. Allowing the student to put his/her day together through words or pictures and having him/her cross off activities once they are completed gives him/her a sense of control.

Concrete Activities—Activities that are made more concrete (e.g., visual, tactile) will help the student be more successful in remaining "on task."

FOCUS ON THE PREVENTION OF PROBLEMS

If you can predict with some degree of accuracy when, and why, a challenging behavior is most and least likely to occur, you will be more likely to create environmental changes that will minimize the likelihood of occurrence. These changes include changing the physical environment (moving the student's desk away from the window), instructional environment (reducing the amount of work required or using different materials), and social environment (placing students in groups strategically).

Section A and Section B are two sets of suggestions that will further promote appropriate classroom behavior. Section A consists of positive strokes paraprofessionals can give to students and Section B describes some important "Do's and "Don'ts" to help manage student behavior.

SECTION A

65 Positive Reinforcers You Can Give Your Students

That's really nice.	Very creative.
Thank you very much.	Very interesting.
That's an interesting way of looking at it.	Wow!
I like the way you're working.	Now you've got the hang of it.
Keep up the good work.	Exactly right.
Everyone's working so hard.	Super.
That's quite an improvement.	Superior work.
Much better.	That's a good point.
Keep it up.	That's a very good observation.
It's a pleasure to teach you.	Good job.
That's an interesting point of view.	You really outdid yourself today.
That certainly is one way of looking at it.	What neat work.
Thank you for raising your hand, Charles.	What is it?
This kind of work pleases me very much.	Sherrie is really going to town.
Congratulations. You only missed ____.	You've got it now.
That's right! Good for you.	Out of sight.
Terrific.	Nice going.
Far out.	You make it look easy.
Beautiful.	That's coming along nicely.
I like the way Bill (the class) has settled down.	Ann is paying attention.
Excellent work.	For sure.
I appreciate your help.	Right on.
Very good. Why don't you show the class?	John is in line.
Marvelous.	That's "A" work.
Groovy.	Joe got right down to work.
Sharp.	Mary is waiting quietly.
That looks like it's going to be a great report.	You're on the right track now.
I like the way Tom is working.	That's clever.
It looks like you put a lot of work into this.	My goodness, how impressive!
Thank you for (sitting down, being quiet, getting right to work, etc.).	
I bet your Mom and Dad would be proud to see the job you did on this.	
I'm very proud of the way you worked (are working) today.	

**Adapted from Edward S. Kubany's "65 Ways to Say GOOD FOR YOU"*

SECTION B

Do's and Don'ts for Managing Student Behavior

DO:

1. Pay particular attention to students as individuals, learning their likes and dislikes, and helping them to accept both their strengths and weaknesses.
2. Treat students with respect, acknowledging their human dignity.
3. Encourage discussion and expression of feelings from students and honor the trust with which their feeling and information are shared.
4. Encourage and praise students' sincere efforts with positive reinforcement.
5. Enjoy students and let them know that you enjoy them.
6. Make students aware that you accept them for themselves.
7. Make yourself available to help students and find ways in which they can be of assistance to you or someone else; allow them to feel worthwhile.
 - a. Make classroom rules concise and positively stated.
 - b. Ensure your methods and strategies are consistent with other team members.

DON'T:

1. Expect children to think, act and feel as adults.
2. Compare students with their peers.
3. Show favoritism.
4. Be insincere.
5. Give unrealistic encouragement.
6. Unnecessarily limit your expectations of a student or a student's own expectations of him/herself.
7. Engage in arguing with students.

***I will not treat a child in a way I
myself would not want to be treated.
—Barbara Coloroso***

B. STUDENT LEARNING STYLES

A summary of relevant research addressing student learning styles reveals four major premises:

1. All individuals can learn.
2. The learning conditions in which different individuals learn best will vary.
3. Students are self-motivated to learn when they have the option of using their learning preference.
4. Individual differences can be accommodated by presenting information in the classroom in a variety of ways through more than one modality.

It is important for paraprofessionals to be aware that a “closer look” at the relevant research on students’ learning styles indicates every person has a learning style – it’s as individual as a signature. Knowing students’ learning styles, teachers can begin to recognize the patterns in which people tend to concentrate best. Learning styles are the result of many influences, and we all have some preferences. Certain learning style characteristics are biological, whereas others are developed through experience.

... every person has a learning style—it’s as individual as a signature.

One method of describing one’s learning style or styles is to refer to “learning channel preference.” The channels are described as visual, auditory and tactile. Although the visual and auditory channels for learning are obvious, the tactile channel consists of learning through touch or feeling.

It should be explained that none of these learning channels are necessarily exclusive of the other, as most learning involves a combination of one or more channels. What is often observed in learning assessments is a preference or predisposition for one channel versus another, but not necessarily an exclusive choice.

The following is a preference test that can be used to illustrate a learner’s channel preference.

Read each sentence carefully and think if it applies to you. On the line, write:

3-often applies

2-sometimes applies

1-never applies

Preferred Channel: VISUAL

- _____ 1. I enjoy doodling and even my notes have lots of pictures, arrows, etc., in them.
- _____ 2. I remember something better if I write it down.
- _____ 3. I get lost or am late if someone TELLS me how to get to a new place and I didn't write down the directions.
- _____ 4. When trying to remember someone's telephone number, or something new like that, it helps me to get a picture of it in my head.
- _____ 5. If I am taking a test, I can "see" the textbook page and where the answer is.
- _____ 6. It helps me to LOOK at the person when listening. It keeps me focused.
- _____ 7. I had speech therapy.
- _____ 8. It's hard for me to understand what a person is saying when there are people talking or music playing.
- _____ 9. It's hard for me to understand a joke when someone tells me.
- _____ 10. It is better for me to get work done in a quiet place.

Visual Total_____

Preferred Channel: AUDITORY

- _____ 1. My written work doesn't look neat to me. My papers have crossed-out words and erasures.
- _____ 2. It helps to use my finger as a pointer when reading to keep my place.
- _____ 3. Papers with very small print or blotchy dittos or poor copies are tough on me.
- _____ 4. I understand how to do something if someone tells me rather than having to read the same thing to myself.
- _____ 5. I remember things that I hear, rather than things that I see or read.
- _____ 6. Writing is tiring. I press down too hard with my pen or pencil.
- _____ 7. My eyes get tired fast, even though the eye doctor says my eyes are O.K.
- _____ 8. When I read, I mix up words that look alike, such as "them" and "then," and "bad" and "dad."
- _____ 9. It's hard for me to read other people's handwriting.
- _____ 10. If I had the choice to learn new information via a lecture or a textbook, I would choose to hear it rather than read it.

Auditory Total_____

Preferred Channel: TACTILE

- _____ 1. I don't like to read directions; I'd rather just start doing.
- _____ 2. I learn best when I am shown how to do something and I have the opportunity to do it.
- _____ 3. Studying at a desk is not for me.
- _____ 4. I tend to solve problems through a more trial-and-error approach, rather than from a step-by-step method.
- _____ 5. Before I follow directions, it helps me to see someone else do it first.
- _____ 6. I find myself needing frequent breaks while studying.
- _____ 7. I am not skilled in giving verbal explanations or directions.
- _____ 8. I do not become easily lost, even in strange surroundings.
- _____ 9. I think better when I have the freedom to move around.
- _____ 10. When I can't think of a specific word, I'll use my hands a lot and call something a "what-cha-ma-call-it" or a "thing-a-ma-jig."

Tactile Total_____

Below is a chart that provides clues for a learner's preference coupled with "Learning Tips" or special teaching methods that the paraprofessional can use under the supervision of the classroom teacher to more efficiently and appropriately meet the individual and unique needs of the student.

	CLUES	LEARNING TIPS
VISUAL	<ul style="list-style-type: none"> Needs to see it to know it. Strong sense of color. May have artistic ability. Difficulty with spoken directions. Overreaction to sounds. Trouble following lecture. Misinterpretation of words. 	<ul style="list-style-type: none"> Use of graphics to reinforce learning - films, slides, illustrations, diagrams doodles Color coding to organize notes and . possessions Written directions. Use of flow charts and diagrams for note taking. Visualizing spelling of words or facts to be memorized.
AUDITORY	<ul style="list-style-type: none"> Prefers to get information by listening - needs to hear it to know it. Difficulty following written directions. Difficulty reading. Problems with writing. Inability to read body language and facial expressions. 	<ul style="list-style-type: none"> Use of tapes for reading and for class and lecture notes. Learning by interviewing or by participating in discussions. Having test questions or directions read aloud or put on tape.
TACTILE	<ul style="list-style-type: none"> Prefers hands-on learning. Can assemble parts without reading directions. Difficulty sitting still. Learns better when physical activity is involved. May be very well-coordinated and have athletic ability. 	<ul style="list-style-type: none"> Learning (making models, doing lab work, and role playing). Frequent breaks in study periods. Tracing letters and words to learn spelling and remember facts. Use of computer to reinforce learning through sense of touch. Memorizing or drilling while walking or exercising. Expressing abilities through dance, drama, or gymnastics.

C. ACCOMMODATIONS AND ADAPTIVE STRATEGIES

Two key attributes to be effective in working as a team are flexibility and creativity. For so many students who fail at learning under conventional classroom conditions, even relatively minor adjustments in their learning environment can make major differences with their academic success or failure. For all of the accommodations and adaptive strategies, the paraprofessionals must remember any changes implemented should be accomplished in concert with the supervising teacher. Good communication among staff is essential to enable any of these suggestions for changes in instruction to achieve their maximum benefit for the student.

The paraprofessional will most likely not be responsible for prescribing accommodations for students or developing specific modifications in the regular or special class. It is important for the paraprofessional to understand the possible accommodations that might be provided and specifically how teachers might implement modifications and adaptive strategies for appropriate learning to occur.

The following are a collection of accommodations covering a wide range of environments and issues, adaptive strategies for the general classroom and specific strategies to facilitate the Teaching/Learning Process.

ENVIRONMENTAL STRATEGIES:

- ✓ Provide a structured learning environment.
- ✓ Adjust class schedules and assignments.
- ✓ Provide note takers.
- ✓ Modify nonacademic times such as lunchroom and recess.
- ✓ Modify physical education.
- ✓ Change student seating.
- ✓ Provide use of a study carrel.
- ✓ Alter location of personal or classroom supplies for easier access or to minimize distraction.
- ✓ Provide visual cues (posters, blackboard directions, work area arrangements).
- ✓ Block out extraneous stimuli on written material.
- ✓ Use room dividers.
- ✓ Provide headsets to muffle noise.
- ✓ Provide timeout areas.
- ✓ Put desk close to the blackboard.
- ✓ Provide computer areas for writing tasks.

ORGANIZATIONAL STRATEGIES:

- ✓ Use a study guide.
- ✓ Rearrange student groups (according to instructional needs, role models, etc.).
- ✓ Provide anticipation cues and teach key direction words.
- ✓ Provide pencil grips.
- ✓ Tape paper to the desk.
- ✓ Number and order assignments.
- ✓ Modify test delivery.
- ✓ Use tape recorders, computer-aided instruction, and other audiovisual equipment for both directions and student responses.
- ✓ Select modified textbooks or workbooks.
- ✓ Tailor homework assignments.
- ✓ Use of one-to-one tutorials.
- ✓ Seat near a model student.
- ✓ Provide peer tutoring with frequent review.
- ✓ Set time expectations for assignments.
- ✓ Teach self-monitoring.
- ✓ Provide cues such as clock faces indicating beginning and ending times.
- ✓ Use timers to show allocated and used time.
- ✓ Provide tests in segments so that student finishes one segment before receiving the next part.
- ✓ Highlight main ideas, supporting details or relevant words featured in the book.
- ✓ Have the student summarize at the end of each lesson.
- ✓ Use behavioral management techniques.
- ✓ Implement behavioral/academic contracts.
- ✓ Utilize positive reinforcements (rewards) and vary them.
- ✓ Use specific rather than general praise.
- ✓ Utilize negative reinforcements (consequences).
- ✓ Use tangible reinforcers.
- ✓ Confer with the student's parents (and the student as appropriate).
- ✓ Confer with the student's other teachers.
- ✓ Establish a home/school communication system for behavior monitoring.

- ✓ Post rules and consequences for classroom behavior and review frequently.
- ✓ Write a contract for student behavior.
- ✓ Offer social reinforcers (i.e., praise) for appropriate behavior.
- ✓ Establish daily/weekly schedules and progress reports for the student.
- ✓ Establish routines for handing work in, heading papers, etc.
- ✓ Provide critical vocabulary list for content material.
- ✓ Collect notebooks frequently.
- ✓ Use raised line paper.
- ✓ Provide calculators.
- ✓ Circle the math computation signs.
- ✓ Use the honor system.
- ✓ Use varied verbal cues, loudness, and pauses when presenting them.
- ✓ Provide organizers for desk material.
- ✓ Teach at varied rates.
- ✓ Provide content/lecture summaries.
- ✓ Implement self-recording of behaviors.
- ✓ Give fewer and simpler directions.

METHODOLOGY STRATEGIES:

- ✓ Repeat and simplify instructions about in-class and homework assignments (such as one task at a time).
- ✓ Supplement oral instructions with visual instructions.
- ✓ Change instructional pace.
- ✓ Change instructional methods.
- ✓ Provide functional tasks familiar to the student.
- ✓ Reduce items required on a task.
- ✓ Use advanced organizers.
- ✓ Help students develop their own strategies.
- ✓ Tape lessons so the student can listen to them again.
- ✓ Provide photocopied material for extra practice (i.e., outlines, study guides).

- ✓ Require fewer drill and practice activities.
- ✓ Give both oral and visual instructions for assignments.
- ✓ Provide for oral testing.
- ✓ Ask student to repeat directions/assignments to ensure understanding.
- ✓ Arrange for a mentor to work with student in his or her interest area or area of greatest strength.
- ✓ Ask frequent questions.
- ✓ Change the wait time for answers.
- ✓ Vary the method and place of lesson presentation:
 - lecture
 - small groups for cooperative learning
 - large groups
 - use audio visuals (i.e., filmstrips, study prints)
 - peer tutors or cross-age tutors (i.e., take notes, monitor assignments, read aloud, listen)
 - demonstrations
 - experiments
 - simulations
 - games
 - 1-to-1 instruction with another adult
 - presentation sequence
- ✓ Adapt test to change required response mode:
 - provide directions in sequence
 - provide discussion questions before reading
 - use word markers to guide reading
 - enlarge or highlight key words on test items

CURRICULUM STRATEGIES:

- ✓ Change instructional materials with much repetition.
- ✓ Utilize supplementary materials.
- ✓ Assess whether student has the necessary prerequisite skills. Determine whether materials are appropriate to the student's current interest and functioning levels.

- ✓ Implement study skill strategies (survey, read, recite, review). Introduce definition of new terms/vocabulary and review to check for understanding.
- ✓ Limit amount of material presented on a single page.
- ✓ Provide a sample or practice test.
- ✓ Be aware of student's preferred learning style and provide appropriate instruction/materials.
- ✓ Use a primary typewriter.
- ✓ Use peer checkers to review completed work.
- ✓ Provide essential fact list.
- ✓ Use manipulatives.
- ✓ Change criteria mastery level.
- ✓ Use picture directions.
- ✓ Provide guided practice.
- ✓ Provide more practice trials.
- ✓ Increase allocated time.
- ✓ Use a strategy approach (such as using memory aids).
- ✓ Provide error drill.
- ✓ Use firm-up activities.
- ✓ Use hand signals to cue behavior.
- ✓ Use self-correcting material.
- ✓ Use dotted lines to line up math problems or show margins.
- ✓ Provide transition directions.
- ✓ Provide daily and weekly assignment sheets.
- ✓ Use graph paper to aid in number alignment.
- ✓ Incorporate popular characters/ themes in assignments.
- ✓ Develop tests from simple to complex.
- ✓ Use color coding.
- ✓ Vary length of tasks.

ADAPTIVE STRATEGIES FOR THE GENERAL CLASSROOM

The following addresses strategies that the supervising teacher and paraprofessional may find helpful when adapting instruction for students who have special learning needs within inclusive general classroom settings.

- _____ Mark student's correct and acceptable work, not his mistakes.
- _____ Examinations and quizzes should be given orally.
- _____ Reading assignments should be presented on cassette tapes.
- _____ Make arrangements for homework assignments to reach home with clear, concise directions.
- _____ Reversals and transpositions of letters and numbers should not be marked wrong. Instead, reversals or transpositions should be pointed out for correction.
- _____ Recognize and give credit for student's oral participation in class.
- _____ Provide extra test time.
- _____ Provide extra assignment time.
- _____ Student should be allowed to tape classroom lectures or discussions.
- _____ Students should be provided a carbon copy of another student's class notes.
- _____ Utilization of peer tutoring.
- _____ Avoid placing student under pressures of time or competition.
- _____ Accept homework papers typed by the student or dictated by him and recorded by someone else, if need be.
- _____ Do not return handwritten work to be copied over; paper is often not improved and student's frustration is added to.
- _____ Quietly repeat directions to student after they have been given to the class; then have him/her repeat and explain directions to you.
- _____ Let student dictate themes or answers to questions on a cassette tape.
- _____ Accompany oral directions with written directions for child to refer to (on black-board or paper).
- _____ Do not require lengthy outside reading assignments.
- _____ Student should be permitted to use cursive writing.

SPECIFIC ADAPTIVE STRATEGIES TO FACILITATE THE TEACHING /LEARNING PROCESS

CHANGING FORMAT	<p>Entails modifying the physical arrangement of the print material. Used when:</p> <ol style="list-style-type: none"> 1. assignment is too long. 2. spacing or organization is interfering with student's visual perceptions.
CHANGING INPUT/OUTPUT MODES	<p>Entails determining the mode (auditory, visual, kinesthetic/tactile) through which students acquire information best. For example, if a student experiences difficulty reading (visual mode), material like tapes (auditory mode) could be used to present information.</p>
MULTI-MEDIA	<p>Using a variety of games, teaching machines, and concrete manipulative objects to facilitate learning.</p>
GROUPING	<p>Students may be grouped according to academic level, academic need, learning style, interest, pattern of social interaction.</p>
SCHEDULES	<p>Tasks may need to be kept short in length. Consideration to the time of day when students learn best should be taken.</p>
TUTORS	<p>Aides, volunteers, or peer tutors help individualize instruction and provide reinforcement of newly learned skills.</p>
REINFORCERS	<p>Students should be reinforced or praised immediately for correct responses when initial learning is taking place. Reinforcement should also be individualized.</p>
REAL-LIFE SITUATIONS	<p>Material relevant to the lives of the students should be used.</p>
REPETITION	<p>Opportunities to review material newly learned should be provided.</p>

D. INDIVIDUAL AND SMALL GROUP INSTRUCTION

Paraprofessionals need to be comfortable providing individual and small group instruction. Individual instruction occurs on a one-to-one basis where small group instruction may entail working with 2-6 students at a time. Only on a rare occasion is the paraprofessional expected to instruct a large group (perhaps the entire class).

Paraprofessional can be used to reinforce a previously learned skill through opportunities for practice, repetition, and drill. Paraprofessionals are generally not the persons to teach a new skill; that responsibility is reserved for the teacher or specialist like the reading teacher or speech-language pathologist. The following are suggestions for providing individual instruction and addresses small group strategies.

INDIVIDUAL INSTRUCTION

Preparation for Instruction

- Learn the proper pronunciation of the student's name.
- Learn about the student's interests, goals, and academic and emotional needs.
- Be familiar with the lesson in advance of the session.
- Request that the teacher/supervisor explain the activity.
- Organize necessary instructional materials.
- Prepare the location for the session.

Appropriate Attitude

- Set an example by being courteous and respectful.
- Be supportive and provide encouragement.
- Communicate that learning is an important and worthwhile task.

Delivery Skills

- Follow the schedule of activities established by the teacher.
- Follow the instructions for teaching outlined by the teacher. When you are not sure what to do, ask the teacher.
- Set realistic expectations for the student so he/she will experience success.
- Utilize questioning techniques that direct instruction and require more than "yes" or "no" answers.
- Learn to listen to the student and what he/she is saying. Give him/her your full attention.
- Pay attention to nonverbal cues exhibited.
- Give feedback to the student about his/her performance.

- Utilize reinforcement procedures that are motivating.
- Follow the plan for dealing with the behavior of the student.
- Be consistent, follow rules, and provide structure.

SMALL GROUP STRATEGIES

There are a variety of strategies that paraprofessionals can use when working with small groups of students. They are described below.

- Involve all students in the group.
- Acknowledge that students have preferences.
- Encourage students to make their own choices.
- Provide some time to work independently.
- Reinforce or compliment often.
- Adapt materials and methods to the needs of the group.
- Do not plan separate activities for group members.
- Identify students' individual needs and adapt materials and methods to meet those needs.
- Encourage cooperation among group members.
- Encourage communication among group members.
- Provide experiences using the "real" thing.
- Provide real-life situations.
- Establish a routine.
- Use natural consequences.
- Use good positioning to promote normal muscle tone, stability, balance, and a sense of security about one's own body.
- Use appropriate verbal prompts, gestures, modeling, and demonstration techniques.
- Eliminate distractions (other students, windows, ceiling fans, etc.).

*Self-initiated learning, once begun,
develops its own momentum.*
—Ray Hartjen

E. ASSESSING STUDENT LEARNING

WHY USE ASSESSMENT:

Information about student performance helps the teacher make instructional decisions. Before instruction, data is gathered through assessments to determine the student's current level of performance. This assists in planning the educational program. During instruction, data is used to evaluate student progress and to explore reasons for poor performance. Para-professionals may be asked to assist in the delivery of assessments. Many different methods are available for assessing student performance.

TYPES OF ASSESSMENTS

Standardized Assessments have detailed procedures for administration, timing and scoring. *It is important that the person giving the assessment not give any prompts or cues, as well as no indication whether an answer is correct or incorrect.*

Informal Inventories sample a variety of different skills and information within a subject matter. They are designed to provide information about the approximate level of student functioning. For example, an informal math inventory would contain number recognition; simple operations of addition, subtraction, multiplication and division facts; calculations involving regrouping; problems involving fractions, decimals and money. Student performance on this would give the teacher some information about which math skills have been acquired and which have not. *It is important for the paraprofessional to specifically note any prompts or cues given to the student.*

Criterion-referenced tests assess whether students have mastered a specific instructional objective. The teacher selects an objective and sets up the task and determines the criterion for acceptable performance. For example, to determine the mastery of writing numbers 1 to 10 with no errors, the person giving the assessment would direct the student to write the name of each of the numbers. Responses are acceptable if they are written correctly. Students with errors in the number formation have not yet met the objective; instruction should continue in this area. *It is important for the teacher and the paraprofessional to communicate the types of prompts or cues allowed and how they should be documented.*

DATA COLLECTION

Baseline—Before instruction begins, pretesting students to establish a performance baseline is useful. This baseline becomes a reference point for evaluating progress. *(It is important for the teacher to establish the task and direct the paraprofessional in the implementation of the task with regards to cues and prompts, if any.)*

TASK ANALYSIS

The question is often asked, “What’s Special About Special Education?” Apart from the previously illustrated individualized learning suggestions and strategies, special education teachers attempt to simplify learning tasks for the learner into smaller sequential components, teaching each step to mastery before proceeding with later stages of the learning process. This educational strategy is referred to as a “Task Analysis.”

A complete discussion of Task Analysis would require a thorough understanding of concepts such as response chains, shaping, modeling, and the appropriate use of reinforcers. It is not the purpose of these guidelines to explore these concepts in depth. It is important, however, to acquaint the paraprofessional with a general description of the process of Task Analysis; this enables the paraprofessional to be somewhat familiar with its various components and provide a concrete example of how the process is used in performing a learning task.

Task Analysis is a process that is used to break down a desired skill into smaller components that are easier to learn, thereby enabling a person to learn the total skill by mastering each of its smaller components. It can be used to break down a complex behavior into easy, teachable behavioral links, and is similar to teaching the sub-skills necessary in order to master a more complex academic skill. In developing a Task Analysis, it is useful to have the task in front of you, working through each step of it and writing down each step as it is done. Then, describe each step to another person to see if they can do it. If they cannot, then break it down into smaller steps. The goal is to use as few steps as possible, but still have the student master the complete task. One example of using Task Analysis would be learning the step-by-step procedure of taking a shower. This involves a number of smaller steps that are learned independent of each other. As these steps are mastered and linked together in a logical order, the total task of taking a shower is finally mastered by having the student follow the correct sequence of the smaller steps. The same procedure is used in another Task Analysis example of using the cafeteria appropriately.

Task Analysis is a process that is used to break down a desired skill into smaller components that are easier to learn.

Name: _____ Task: 03 Showering

Objective: Bathe or shower self-independently

Criterion: _____ Mastery date: _____

1	Take clothes off																
2	Turn water on																
3	Adjust water temperature																
4	Rinse body																
5	Rinse hair																
6	Pick up shampoo																
7	Shampoo in hand																
8	Shampoo in hair																
9	Rub hair 30 seconds																
10	Rinse hair																
11	Pick up washcloth																
12	Pick up soap																
13	Soap washcloth																
14	Wash face, neck, head																
15	Wash upper body																
16	Wash lower body																
17	Wash private parts																
18	Rinse entire body																
19	Rinse washcloth																
20	Put down washcloth																
21	Turn off water																
22	Pick up towel																
23	Dry face and upper body																
24	Dry lower body and privates																
25	Put down towel																
26	Put on clothes																

Recording Key: (I) Independent Correct Response (V) Verbal Prompt (M) Model (P) Physical Assist

Name: _____ Task: _____ Food: Cafeteria

Objective: Demonstrates ability to use cafeteria appropriately

Criterion: _____ Mastery Date: _____

1	Gets to cafeteria														
2	Chooses correct line for food														
3	Demonstrates appropriate social skills in line														
4	Chooses item														
5	Asks for assistance when needed														
6	Pays for item to next dollar or with meal ticket														
7	Carries tray to table														
8	Uses appropriate utensils to eat														
9	Eats with reasonable speed														
10	Demonstrates appropriate manners at table														
11	Returns tray to receptacle														
12	Throws garbage away														
13	Chooses appropriate activity after meal														
14	Demonstrates appropriate hygiene after meal														

Recording Key: (I) Independent Correct Response (V) Verbal Prompt (M) Model (P) Physical Assist

XI. HEALTH AND SAFETY

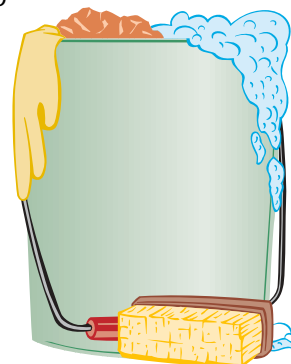
Paraprofessionals in school settings have a high level of physical contact with many of the students with whom they work. This may include: assisting students with eating, toileting, personal hygiene, lifting, using therapeutic equipment, pushing a wheelchair or assisting with a specific health-related need. It is very important to understand how to carry out these job expectations while keeping everyone safe. Any part of the job that requires the use of equipment, a specific procedure or physical contact with a student should be clearly defined and explained by a supervisory staff member before attempting that part of the job.

A. UNIVERSAL PRECAUTIONS

The school district will be expected to update and provide staff with inservice information regarding the use of universal precautions. Universal precautions are a series of actions and activities that are used across the school day to keep the staff safe from the risk of infectious diseases or from spreading infectious diseases to others. It is not possible to know who may be a carrier of an infectious disease just by being acquainted with the students or staff in school. During the school day, expectations are:

1. Wash hands as often as possible, preferably between working with students, just as doctors or nurses do between patients. Use soap and hot running water. Make sure to wash hands after handling diapers, Kleenex, or equipment that students have used; after handling soiled clothing; and before and after handling food. Do this even if disposable gloves are worn during these activities.
2. Use disposable gloves. Use the gloves only once. Use the gloves for any activity that may include contact with bodily fluids of any kind. Remember, infections and diseases can be contracted from any student or staff member. If a student has a physical disability that requires assistance with eating, he/she may drool. Gloves should be worn in situations where saliva may be transferred from one person to another. Hand-washing before and after feeding is still very important and necessary even with glove use. Know where gloves are kept or ask.
3. If a room surface has blood or bodily wastes on it, it will need to be cleaned immediately. The supervisor or the school custodial service will know where approved disinfectants are kept. Each school will have a specific procedure for cleaning surfaces with these sorts of contaminations on them.

Using universal precautions will greatly increase personal safety and will protect staff from risk of infection from HIV, Hepatitis B and many other infectious diseases. It also increases the likelihood of better health and safety. Check with local districts to determine if employees



are eligible for post contact/exposure Hepatitis B shots if they come in direct contact with blood.

B. SEIZURES

Seizures are not uncommon events in the school setting. Some students with special needs have seizure conditions. Typically, seizures are controlled with medication. There are occasions when this is not the case. Some seizures are mild and may not be noticeable. Discuss with the supervisor what the child's seizures look like, usual frequency, length and treatment. Sometimes paraprofessionals may not even be informed that the child is subject to seizures. This could be that the parents did not note the condition because it has been well controlled by medications and they felt the probability of an occurrence to be remote or that they themselves are unaware—particularly when the child has the absence (petit mal) or complex partial (psychomotor) types of epilepsy.

What to do if a child has a seizure:

1. Remain calm/ provide privacy.
2. Time the seizure. Note details.
3. Do not restrain or interfere with their movements.
4. Help person lie down.
5. Cushion head.
6. Try to turn person on side.
7. Clear area around the student.
8. Loosen any tight neckware.
9. Do not put anything in his/her mouth.

After the seizure:

1. Provide privacy and rest.
2. Notify supervisor.
3. Student may need a change of clothing.
4. Do not give them food or drink until fully awake.
5. Let the student know they had a seizure. Turn the event into a learning experience for other students to increase their understanding and acceptance.
6. Check with supervisor to see if a seizure report needs to be filled out, unless seizures are common in this student.

Call 911 if: (if possible, check with supervisor first)

1. If seizure continues without fully stopping for more than 5 minutes if no seizure history, 10 minutes with known seizure history, or any time seizure was preceded by a head injury or in a diabetic person.
2. One seizure occurs right after another seizure.
3. Breathing is labored or absent after seizure is stopped.
4. Serious injury occurred during seizure.

REMEMBER: A seizure cannot be stopped or controlled. It will run its course. Assisting someone having a seizure can be a frightening experience and it may be necessary to discuss the episode with the supervisor. **Once again, if there are questions, ask.**

C. MEDICATIONS

State and federal laws prohibit the delivery of medications to students by an adult in the school unless the adult has had specific training under the supervision of a nurse. Paraprofessionals seldom hold the responsibility for delivering medication. It is possible, however, that a job description might include dispensing medication at some point, and the responsibility should be regarded seriously. Medications should not be carried by students or kept in classrooms.



D. ASSISTING STUDENTS WITH EATING

Some students with disabilities require assistance with feeding. This may include completely feeding a student who is unable to feed him/herself; preparing food and giving minimal physical prompts; or visually monitoring students during meal times. In particular, students with cerebral palsy may lack the mouth, head and trunk control, sitting balance, hand function and eye-hand coordination for adequate feeding skills. Many of these students will have individualized feeding programs in which an occupational therapist, speech pathologist or supervisor will provide training. The following, however, are general guidelines for feeding students:



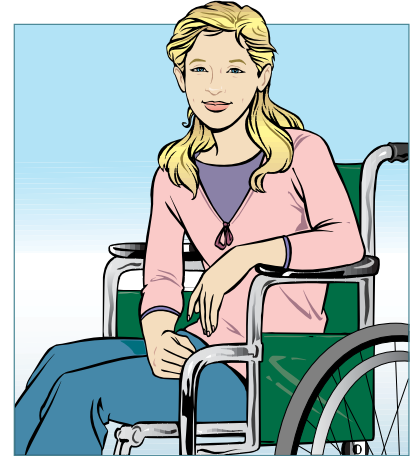
- Use disposable non-latex gloves when direct skin contact with saliva is expected.
- Hand washing is important before and after feeding.
- Seat the student as upright as possible.
- Sit at eye-level with the student.

- Talk to the student while feeding. Mealtimes are typically social times. Be conversant and pleasant, and do not ignore the student by talking to others. Focus attention on the student.
- Tell the student when a bite of food is offered and identify the food item.
- Use a metal spoon, or adapted spoon prescribed for the student. Do not feed the student with a plastic spoon. Do not use a fork, unless directed to do so.
- Use small amounts of food, approximately 1/2 teaspoon-size bites. Cut meats and other chewy foods into small pieces. Hot dogs should be cut lengthwise to avoid cylinder shapes which may cause choking.
- Make sure food has been swallowed before delivering the next bite.
- Place food on center of tongue, press down gently and remove spoon with movement that will encourage the student to clear the spoon with his/her upper lip.
- Give a few swallows, 1-2, of liquid at a time.
- Review the Heimlich maneuver, and ask about the maneuver specific to the size of the student being fed.
- Ask what procedures are used for a student who uses a wheelchair who might be choking.
- It is recommended that persons who feed students be trained in first aid and CPR.

E. WHEELCHAIR SAFETY

Placing students in a wheelchair can be a complicated procedure and should be discussed with a supervisor or therapist before attempting to do so. Unless a therapist has a specific procedure that is followed, the following guidelines should be helpful for most students who use a wheelchair:

- **Always** set wheelchair brakes before placing a student in or removing from a wheelchair.
- Typically, students should be placed in a wheelchair with their buttocks as far back in the seat as possible, so as to encourage upright posture.
- Fasten hip or seat belts first, secure to a snug position after making sure that student is seated as far back in the seat of the chair as possible.
- Fasten shoulder straps and foot straps next.
- Check feet to make sure that they are placed securely in foot rests before fastening straps.



- When escorting or pushing a student using a wheelchair, discuss the destination with the student. Do this regardless of the severity of their handicapping condition.
- Always set the brakes when coming to a stop for more than a few seconds. When outdoors and pushing a student using a wheelchair, turn the chair around and go backwards down short inclines and over curbs. Watch for gratings in the sidewalk that front wheels could easily fall into and cause the chair to tip over or forward. Proceed across gratings at an angle.

F. LIFTING, HANDLING AND TRANSFERRING STUDENTS

Some students have physical needs so significant that an adult must move them from place to place. Lifting, carrying and transferring children are all potentially dangerous activities. Most adults, in their lifetime, will experience some degree of lower back pain due to improper lifting. An unsafe transfer could inadvertently and accidentally put a child in danger. Methods of moving children, such as carrying them, or using wagons, carts, or strollers, are not advised in school and present a strong liability for potential injury to staff and students. Correctly using adaptive equipment (e.g. wheelchairs, walkers, and standers) is the safest way to move children in school. To prevent injury, it is important to learn how to safely transfer a student. To safely transfer a student from one piece of adaptive equipment to another, determine correct lifting procedures.

It is most important that foresight and planning occur prior to all attempts to transfer a child, even a very small child. **Lifting a child, *alone*, who weighs more than 1/3 of your body weight is dangerous and should be avoided. With large students, two-person lifts must be used. Always avoid transferring large students down onto the floor.** A raised mat or changing table should be provided at school so placing large students on a floor mat will not be required.

ALWAYS GET HELP if it is the first time lifting a certain student or anytime there is a question about how to lift safely. The physical therapist or the supervisor, prior to any attempts at transferring students, should provide training. If, after training, there are concerns regarding the safety of lifting or positioning, always tell the therapist or teacher.

NEVER presume to deal with this issue alone. There are probably others who have the same concerns. The goal is to maximize staff and student safety. Paraprofessionals who are under the care of a physician and have physical restrictions for lifting, must notify their supervisor or therapist prior to participating in training or lifting and transferring students. Additional resources are available with training provided by the physical therapist.

G. TOILETING

Many students with disabilities require assistance using the restroom. This assistance may include

- changing diapers,
- assisting student to and from the toilet,
- physically assisting a student with pulling pants up or down before and after using the toilet,
- visually checking to make sure a student has successfully used the restroom or just reminding a student that it is time to use the restroom.

While assisting with any of the listed procedures that require physical contact, wear disposable gloves. If the student requires a diaper change, request demonstration and supervision the first time. A supervisory staff member will review any specific diapering and toileting procedures. The larger the student is, the more complicated and sometimes difficult the procedures may be. Remember, the dignity of the student must be regarded and respected at all times. Even though this aspect of the paraprofessional's job may be perceived as difficult and unpleasant, it still needs to remain a dignified, personal process for the student.

XII. PARAPROFESSIONAL APPENDICES

APPENDIX A: RELATED SERVICES STAFF

Licensed physical therapy assistants, and certified occupational therapy assistants, speech-language assistants.

LICENSED PHYSICAL THERAPY ASSISTANTS

A professional person having completed an associate degree recognized by meeting the American Physical Therapy Association (APT) standards who works under the supervision of a licensed or registered physical therapist.

Duties of the Physical Therapy Assistant (PTA)

The physical therapy assistant may perform the following activities:

1. Assist in gross motor screening and development activities.
2. Conduct physical therapy programs and procedures that are planned and designed by the supervising physical therapist.
3. Prepare therapeutic or instructional materials.
4. Develop, readjust, or repair adaptive equipment and devices.
5. Monitor student therapy progress and write reports.
6. Assist in scheduling meetings or conferences and maintaining student records.
7. Participate with the supervising physical therapist in inservice training and meetings related to the provision of therapy programs and services.

The physical therapy assistant may not independently and without general supervision plan student therapy programs, interpret diagnostic results, determine case selection, transmit clinical information to any person other than the supervising professional, refer a student to other professionals, and use any title other than physical therapy assistant.

Supervision of the Physical Therapy Assistant

1. Supervisory Qualifications

Supervising registered physical therapists must hold current certification status with the American Physical Therapy Association.

2. Supervisory Caseload

The supervising registered physical therapist may not currently supervise more than two (2) full-time physical therapy assistants, and two (2) full-time physical therapy aides, or four (4) physical therapy aides.

3. Quantity and Quality of Supervision

Physical therapy assistants require general (not on-site) supervision by a registered physical therapist. The supervision time requirement for the registered physical therapist is one on-site visit to the student at least once for every six visits made by the assistant or once every two weeks, whichever occurs first.

CERTIFIED OCCUPATIONAL THERAPY ASSISTANT (COTA)

A licensed person meeting the Occupational Therapy Association (OTA) standards who works under the supervision of a licensed Occupational Therapist.

Duties of the Certified Occupational Therapy Assistant (COTA)

The occupational therapy assistant may perform the following activities:

1. Assist in fine motor screening and development activities.
2. Conduct occupational therapy programs and procedures that are planned and designed by the supervising occupational therapist.
3. Prepare therapeutic or instructional materials.
4. Develop, readjust, or repair adaptive equipment and devices.
5. Monitor student therapy progress and write reports.
6. Assist in scheduling meetings or conferences and maintaining student records.
7. Participate with the supervising occupational therapist in inservice training and meetings related to the provision of therapy programs and services.

The certified occupational therapist assistant may not independently and without general supervision plan student therapy programs, interpret diagnostic results, determine case selection, transmit clinical information to any person other than the supervising professional, refer a student to other professionals, and use any title other than certified occupational therapy assistant.

Supervision of the Certified Occupational Therapy Assistant (COTA)

1. Supervisory Qualifications

Supervising occupational therapists must hold current certification status with the American Occupational Therapy Association.

2. Supervisory Caseload

The supervising occupational therapists may not currently supervise more than two (2) full-time certified occupational therapy assistants, and two (2) full-time occupational therapy aides, or four (4) occupational therapy aides.

3. Quantity and Quality of Supervision

The supervising occupational therapist shall determine the degree of supervision to administer the supervisee's clinical experience, responsibilities, and competence at a minimum.

Direct supervision shall require the supervisor to be physically present in the direct treatment area of the client-related activity being performed by the supervisee. Direct supervision requires face-to-face communication, direction, and observation.

Routine supervision requires direct contact at least daily at the site of work, with interim supervision occurring by other methods, such as telephonic, electronic, or written communication.

General supervision requires face-to-face communication, direction, observation, and evaluation by the supervisor on the supervisee's delivery of client services at least monthly at the site of the client-related activity, with interim supervision occurring by other methods, such as telephonic, electronic, or written communication.

SPEECH-LANGUAGE ASSISTANT

The term "speech-language assistant" is the preferred terminology in this guide for an individual who is functioning as a "speech-language pathology aide" in accord with the Board of Speech-Language Pathologists and Audiologists.

A person meeting the following minimum requirements designated by the Board of Speech-Language Pathologists and Audiologists who works directly under the supervision of a licensed professional (must possess a high school diploma or equivalent, basic skills appropriate to specific employment situations, including acceptable communications patterns, the ability to work with and take direction from supervisors, the ability to relate to the population served, and the willingness to attend specific training activities as determined by the supervisor).

Duties of the Speech-Language Assistant

Speech-language assistant may perform the following activities:

1. Assisting in screening speech, language, and/or hearing.
2. Conducting programs and procedures that are planned and designed by the speech-language pathologist.

3. Preparing instructional materials.
4. Monitoring hearing aids and equipment.
5. Participating with the speech-language pathologist in inservice training and meetings related to the provision of programs and services.
6. Scheduling, or assisting in scheduling of conferences, meetings, etc.
7. Data collection.
8. Reporting changes in student performance to the supervising speech-language pathologist.
9. Any other activities as allowed by the Board of Speech-Language Pathologists and Audiologists in rule 8.62.504.

Supervision of the Speech-Language Assistant

Supervisory Qualifications

Supervising speech-language pathologists must be qualified to train and supervise the speech-language assistants. The supervising professional must:

1. be a fully licensed speech-language pathologist; and
2. have a commitment to the utilization of supportive personnel.

Supervisor—Responsibility

Supervisor—Responsibility is specified within Montana Law Sections 8.65.501 and 8.62.503 and 862.504 which are as follows:

APPENDIX B:

SUPERVISOR RESPONSIBILITIES

8.62.501 SUPERVISOR RESPONSIBILITY

1. All persons working in the capacity of a speech or audiology aide must be under the direct supervision of a fully licensed speech-language pathologist or audiologist. This supervisor assumes full legal and ethical responsibility for the tasks performed by the aide and for any services or related interactions with a client.
2. When aides are providing direct services under a licensed supervisor to individuals under 18 years of age, the supervisor is responsible for so informing, in writing, the parent, guardian, surrogate parent or person acting as a parent of a child in the absence of a parent or guardian.
3. The supervisor is responsible for ensuring that the aide is adequately trained for the tasks he/she will perform. (History: Sec. 37-15-202, MCA; IMP, Sec. 37-15-102, MCA; NEW, 1981 MAR p. 363, Eff. 4/17/81; TRANS, from Dept. of Prof. & Occup. Lic., C. 274, L. 1981, Eff. 7/1/81; AMD, 1983 MAR p. 274, Eff. 4/1/83; AMD, 1989 MAR p. 2194, Eff. 12/22/89.)

SUPERVISORY CASELOAD

The maximum number of assistants supervised by one professional may vary in relation to (a) tasks assigned to the assistant, (b) time limits imposed by the supervisory guidelines given below, and (c) time required of the professional in the direct provision of clinical services. Additionally, because of the time required for training and supervision, it may be necessary to reduce the number of clients directly served by the professional in relation to the number of assistants being supervised.

QUANTITY AND QUALITY SUPERVISION

Section 8.62.502 Sub Chapter 5 of the Administrative Rules of Montana (Sept. 30, 1994) specifies the requirements for the quantity and quality of speech-language assistants.

8.62.502 SCHEDULE OF SUPERVISION CONTENTS

1. For monitoring purposes, the supervisor must complete an aide registration form supplied by the board. This must include an acceptable schedule of supervision.
2. Aides must be supervised approximately 20 percent of the client contact time, of which 10 percent must be direct contact.
3. The schedule of supervision must be signed by the proposed supervisor and by a responsible representative of the employing agency. The schedule must be reviewed

and approved by the board annually by October 31. Aides employed after October 31 shall work no more than 30 calendar days without registering with the board.

4. The supervisor must complete a mid-year verification form by February 25 of each year, on a form supplied by the board, to indicate continuing compliance with the schedule of supervision previously filed under (1) above. (History: Sec. 37-15-202, MCA; IMP, Sec. 37-15-102, 37-15-313. MCA; NEW, 1981 MAR p. 363, Eff. 4/17/81; TRANS, from Dept. of Prof. & Occup. Lic., C. 274, L. 1981, Eff. 7/1/81; AMD, 1998 MAR p. 2194, Eff. 12/22/89; AMD, 1994 MAR p. 1992, Eff. 7/22/94.)

8.62.504 Non-allowable Functions of Aides

1. The supervisor is obligated to ensure that the aide assists only in the provision of those services which are within the abilities of the aide as determined by the training and experience of that aide. The supervisor is directly responsible for all decisions affecting the client in all phases of diagnosis, treatment and disposition. It is recognized that administrative responsibilities for the aide(s) may be with other than the professional supervisor and those responsibilities are not included in this regulation.
2. Although aides must be under the supervision of a licensee, the aide shall, nevertheless, not do the following activities:
 - a. conduct speech/language evaluations, although screening activities allowed by the supervisor are permitted;
 - b. interpret data or clinical experience into diagnostic statements of clinical management policies;
 - c. transmit clinical information to anyone other than the professional directly supervising him/her;
 - d. determine the selection of cases;
 - e. refer clients; or
 - f. write or plan individual or group therapy/rehabilitation plans.
3. Speech-language pathologist or audiologist aides, who are currently enrolled in speech/language pathology/audiology under supervision, can practice only if all of the following conditions have been met:
 - a. completion of 100 graduate-level clinical clock hours, of which at least 25 hours were diagnostic;
 - b. completion of 10 semester hours of graduate credits in the professional area;
 - c. a minimum requirement of 10 percent additional supervision (beyond the 20 percent required in ARM 8.62.502) while performing diagnostic and interpretive functions in the first year of non-allowable activities. The supervision may

return to the 20 percent requirement of ARM 8.62.502 after the first year, at the discretion of the supervising speech-language pathologist or audiologist;

- d. completion of the master's program within five years of commencement; and
- e. annual application for waiver of non-allowable functions of aides to the board for approval prior to commencement of performance as a speech-language pathologist or audiologist aide. (History: Sec. 37-15-202, MCA; IMP, Sec. 37-15-102, MCA; NEW, 1981 MAR p. 363, Eff. 4/17/81; TRANS, from Dept. of Prof. & Occup. Lic., C. 274, L. 1981, Eff. 7/1/81; AMD, 1989 MAR p. 1566, Eff. 10/13/89; AMD, 1993 MAR p. 2913, Eff. 12/10/93; AMD, 1996 MAR p. 2976, Eff. 11/8/96.)

OTHER PARAPROFESSIONALS OR PARAEDUCATORS

For other areas of development, oftentimes noncertified personnel, such as mobility aides, carry out prescribed duties as directed by certified staff. Such personnel are not to engage in any of the activities restricted from speech-language assistants, physical therapy assistants and certified occupational therapy assistants. All supervision of these personnel must be on site and direct and in accordance with school district policy. Supervision plans should be in writing and reviewed periodically.

Physical therapy assistants (PTAs) may supervise not more than one full-time aide or the equivalent. Certified occupational therapy assistants (COTAs) must work under general supervision licensure requirements.

Paraprofessionals assigned to assist students with special education needs must be under the supervision of the teacher or other professionals designated as primarily responsible for instructional planning for the student. The designated supervising professional must not delegate any activity to the paraprofessional that requires professional skill, knowledge, and judgment.

For purposes of service billing for third party funding alternatives, only certified staff can be reimbursed for their direct service or supervisory time.

APPENDIX C: DAILY SCHEDULE

Name: _____ Contact Persons: _____

Before School Responsibilities: _____

Example: Greet Johnny & Sue, bus #10, by main entry of elementary school at 7:55 am and escort to Mrs. Smith's room #204. Greet Joe, in wheelchair, by middle school entry at 8:02 am. Accompany him to his locker and assist with outer clothing. Encourage independence.

CLASS SCHEDULE

Time	Monday	Tuesday	Wednesday	Thursday	Friday
__ : __ to __ : __					
__ : __ to __ : __					
__ : __ to __ : __					
__ : __ to __ : __					
__ : __ to __ : __					
__ : __ to __ : __					
__ : __ to __ : __					

Student Departure Responsibilities: _____

Example: From __ : __ to __ : __ escort Johnny & Sue to bus #10 and Joey to bus #5.

After School Responsibilities: _____

Example: Disinfect toys and clean sink area.

From: Substitute Paraeducator Guide. The Paraprofessional Connection, Eagle River WI

APPENDIX D: ACRONYMS

ADA	Americans With Disabilities Act
AES	Alternative Educational Setting. An appropriate placement outside the public school meeting the educational needs of a special education student subsequent to disciplinary action.
AFDC	Aid to Families with Dependent Children
AGATE	Association of Gifted and Talented Educators
AU	Autism
BIA	Bureau of Indian Affairs
CD	Cognitive Delay
CEC	Council for Exceptional Children
COTA	Certified Occupational Therapy Assistant
CoTOP	Comprehensive Training Opportunities for Paraeducators
CSPD	Comprehensive System of Personnel Development
CST	Child Study Team
CWD	Child with a Disability
D	Deafness
DB	Deaf-blindness
ED	Emotional Disturbance
ESEA	Elementary and Secondary Education Act
FAPE	Free Appropriate Public Education. The provision of a special education and related services to a handicapped child, at no cost to the parent and with full procedural safeguards.
HI	Hearing Impairment
IDEA	Individuals With Disabilities Education Act
ITBS	Iowa Test of Basic Skills
LD	Specific Learning Disability
LRE	Least Restrictive Environment. The placement option in which the child, to the maximum extent appropriate (as defined in the IEP), is educated with children who are not handicapped.
MAEMSP	Montana Association of Elementary and Middle School Principals
MASS	Montana Association of School Superintendents
MBI	Montana Behavioral Initiative
MEA	Montana Education Association

MFT	Montana Federation of Teachers
NEA	National Education Association
OHI	Other Health Impairment
OI	Orthopedic Impairment
OT	Orthopedic Therapist
PIR	Pupil-instruction Related
PLUK	Parents, Let's Unite for Kids
PSA	Paraeducator Supervision Academy
PT	Physical Therapist
PTA	Physical Therapy Assistant
SECTION 504	That portion of the Rehabilitation Act of 1973, which prohibits discrimination on the basis of disability.
SIP	School Improvement Plan
SLI	Speech-language Impairment
TBI	Traumatic Brain Injury
TOPA	Trainers of Paraeducators Academy
VI	Vision Impaired

XIII. BIBLIOGRAPHY

Ayers, Barbara, Hedeon, Deborah, *Creating Positive Behavioral Supports*. 1997.

Hammeken, Peggy, *Inclusion: An Essential Guide for the Paraprofessional*. A practical reference tool for all paraprofessionals working in inclusionary settings. Peytrol Publications, Inc., PO Box 1162, Minnetonka, MI, 55345.

Kelker, Kathy, *Montana Parent's Guide to Special Education*, PLUK, Billings, MT. www.pluk.org

Mule, Sam, Mule, Kathy, Hanke, Debra, "Substitute Paraeducator Guide," The Paraprofessional Connection, 1830 Bald Eagle Lane, Eagle River, WI 54561, 715-479-7374. www.mw.sisna.com/paraconnect

Mule, Sam, Mule, Kathy, Hanke, Debra, "As the Year 'ROLES' On, A Calendar for Paraeducators," The Paraprofessional Connection, 1830 Bald Eagle Lane, Eagle River, WI 54561, 715-479-7374. www.mw.sisna.com/paraconnect

Pickett, Anna Lou, Heller, William, *Effective Utilization of Paraprofessionals by Professionals*, (1982).

Pickett, Anna Lou, Gerlach, Kent, *Supervising Paraeducators in School Settings: A Team Approach*, Austin, Texas, ProEd., 1997.

Stimson, Barbara, *Paraeducator Handbook, A Training Guide for Paraeducators*, PAR²A Center, Paraprofessional Resource and Research Center, University of Colorado at Denver.

Lewis, Rena B and Doorlag, Donald H. *Teaching Special Students in the Mainstream*, Charles E. Merrill Publishing Company, 1983.

This guide is a compilation of current state procedural guides from the states of Kansas, Arkansas, Colorado, Utah, Iowa, Nebraska, North Dakota, and Minnesota that were collected and organized through the efforts of Mountain Plains Regional Resource Center.

XIV. RESOURCES

NEA Paraeducator Program: Nesa Chappelle, NEA Teaching and Learning, 1201 16th Street, NW, Washington, DC 20036-3290, 202-822-7701, nchappelle@nea.org.

State CSPD Coordinator, Susan Bailey-Anderson, PO Box 202501, Helena, MT 59620-2501, sbanderson@state.mt.us, 406-444-2046.

Montana Center on Disabilities, MSU-Billings. www.msubillings.edu/mtcd/paraed/index.htm

Montana Center on Disabilities Resource Library for Paraprofessionals.

Training Resources: CSPD regions have several trainers to provide inservice opportunities on Paraprofessional Training Topics. For more information, contact Susan Bailey-Anderson (above) or regional CSPD Chairs.

<http://www.opi.state.mt.us/CSPD/Home.htm>

Topics/ Paraprofessional Academies:

- I. Instructional Teamwork
- II. Orientation to Special Education
- III. Interpersonal Skills
- IV. Personal Growth and Development
- V. Student Supervision
- VI. Instructional Strategies
- VII. Behavior Management
- VIII. Instructional Technology
- IX. Life Skills
- X. Severe Communication Support Needs
- XI. Severe Behavior Support Needs
- XII. Significant Health Support Needs

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CONFIDENTIALITY

Complete at time of employment

Confidentiality is one of the most critical and important aspects of a paraprofessional's job. Students and parents have a legal and ethical right to data privacy. Paraprofessional records may be accessed in the District Personnel Office. Below are guidelines to consider when working within the school system.

1. Consider, as a general rule, putting yourself in the student's and parent's position: What information would you want discussed with others regarding your child? In what settings, and with whom?
2. Never use other students' names or share information regarding their programs with parents during staffings or other conferences.
3. Information regarding specific students and programs should remain confidential and should not be shared in lunchrooms, staff rooms, or in the community.
4. Paraprofessionals should question school policies only through the proper school-designated channels, generally beginning with their direct supervisor or, if necessary, the principal of the building.
5. Paraprofessionals should have access to special education records in order to be most effective in their jobs. Since the information is confidential, paraprofessionals must first discuss with the supervisor(s) the district's procedures for review.
6. Paraprofessionals need to support teachers' techniques, materials, and methods, especially in the presence of students, parents, and other assistants. Questions should be directed to the specific teacher privately.
7. When having conversations or writing confidential information regarding a student or family, be aware of those around you who may be within hearing/reading distance. Look for a more private place within the school building.
8. The Individual Education Plan (IEP) is a legal document developed by a team based on student needs with goals and objectives in areas of service. Review the content with the special education teacher.

I have read and been instructed on confidentiality.

Signed: _____

Date: _____

From: Alexandria School District, Alexandria Minnesota



Linda McCulloch, Superintendent

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